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A SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM FOR ALBERTA NURSE EDUCATORS

by

© SHARON L. RICHARDSON

A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH

IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE

OF MASTER OF EDUCATION

DEPARTMENT OF EDUCATIONAL ADMINISTRATION

EDMONTON, ALBERTA

FALL, 1979

THE UNIVERSITY OF ALBERTA

FACULTY OF GRADUATE STUDIES AND RESEARCH

The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies and Research, for acceptance, a thesis entitled "A Special Purpose Master's in Nursing Program for Alberta Nurse Educators" submitted by Sharon L. Richardson in partial fulfilment of the requirements for the degree of Master of Education.

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Date Sept. 26, 1979

ABSTRACT

The purpose of this study was to provide data germane to the planning of Alberta master's level programs in nursing, through examining personal and professional characteristics of Alberta nurse educators, their interest in participating in a special purpose master's in nursing program for Alberta nurse educators, and their perceptions of importance of program goals and characteristics.

Data were collected using a questionnaire comprised of five sections related to: (1) personal and professional characteristics of respondents; (2) expressed interst in pursuing a special purpose master's in nursing program; (3) perceptions of importance of 16 goals and (4) perceptions of importance of 40 characteristics of a special purpose master's in nursing program; and (5) comments concerning such a program. The questionnaire was distributed to all Alberta nurse educators involved in practical, diploma, baccalaureate and master's nursing programs and to a selected sample of 31 nurse educators employed in Alberta health care agency inservice programs.

Data were analyzed using frequency and percentage distributions to describe respondents' personal and professional characteristics and to assess their interest in participating in the program; rank ordering of response frequencies to identify reasons for lack of interest and to identify potential facilitators and barriers to participation; response means, standard deviations and mean ranks to identify and describe important program goals and characteristics; t and F tests to determine statistically significant mean differences in Alberta nurse educators' perceptions of importance of program goals

and characteristics; and the Scheffé test for statistically significant F tests to determine between which of the respondents, grouped by personal and professional characteristics, differences in perceptions of importance of program goals and characteristics existed.

Analysis of the data revealed that Alberta nurse educators expressed sufficient interest in participating in a special purpose master's in nursing program to warrant further examination of the feasibility of such a program. Alberta nurse educators are constrained in their geographic mobility and they perceived financial constraints as a major barrier to their participation. Generally, Alberta nurse educators were in agreement concerning the importance of the 16 specified goals and 40 specified characteristics of a special purpose master's in nursing program. Alberta nurse educators were neither in favour of admitting students with non-nursing baccalaureate degrees, nor in requiring a thesis. Alberta nurse educators perceived that nursing practice experience should be required for admission, equal program emphasis should be on clinical specialization and preparation for the teaching role and the research component of the program should prepare an informed research consumer. Alberta nurse educators most likely to be involved in planning master's level in nursing in Alberta perceived program characteristics differently than some of the potential students.

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CHAPTER ONE

THE PROBLEM AND ITS SETTING

INTRODUCTION

Within the past decade, increasing concern has been expressed in Alberta about graduate level education for Alberta nurses. This concern has been expressed by the province's professional nursing association, provincial government and Faculties of Nursing at the University of Alberta and the University of Calgary.

The Alberta Association of Registered Nurses, in its 1970 Brief to the Commission on Educational Planning, had recommended that universities recognize the need to develop master's programs in nursing and:

> That because of the dearth of nurses prepared at the master's level for leadership positions, a financial assistance policy be established on an escalating basis for level of program (at least $4,000.00 per student for master's preparation). (pp. i-ii)

The Report of the Alberta Task Force on Nursing Education, released in September of 1975, by the Department of Advanced Education and Manpower of the Government of Alberta, reported that the province suffered a substantial deficit with respect to graduate education for nurses, a situation which the Task Force viewed as ". . . extremely dangerous . . ." (p. 86). In addition to the master's program in acute care nursing which was scheduled to commence in the fall of 1975, the Task Force also supported the development of other graduate programs in nursing ". . . at the earliest possible time . . ." (p. 86).

Again, in its July 1976 Response to the Alberta Task Force on Nursing Education, the Alberta Association of Registered Nurses urged ". . . the establishment, in Alberta, of more nursing programs at the masters level" (p. iii).

In November, 1977, the Alberta government published its Position Paper on Nursing Education: Principles and Issues, which was intended to be a framework within which planning and coordination for the education of nursing personnel in Alberta could be carried out. In Issue #6, The Provision of Opportunities for Higher Education for Professional Nurses, it affirmed the existence of a need within the province for an increased number of nurses prepared at the graduate level to develop service and educational programs. The Alberta government (1977) further directed that, "Accessibility to all existing routes for financial support and program availability for higher education for nurses will be explored and facilitated" (p. 6).

A join submission to the Government of Alberta by the Faculties of Nursing at the University of Alberta and the University of Calgary, in June, 1978, entitled Response to Issue #6 Higher Education for Professional Nurses, asserted that "There would seem to be widespread agreement that the numbers of nurses in Alberta prepared at the master's and doctoral level should be increased" (p. 1). The joint submission went on to emphasize that nursing as a discipline was a legitimate area of graduate study because:

> The need for advanced study in nursing is evident when one considers the following developments: (1) nursing as a profession and professional discipline is concentrating heavily on developing knowledge from its own perspective, (2) in addition, knowledge being developed outside nursing but applicable to nursing practice, management, education, or research is increasing,

> (3) nurses must function in a complicated, interdisciplinary, comprehensive health care delivery system, and (4) society's increasing concern with promoting health (not only treating illness) has encouraged the nursing profession to contribute more significantly in this realm and in a more accountable manner than in the past, in order to facilitate an innovative and flexible health care system. (p. 1)

The joint submission of the Faculties of Nursing drew attention to the insufficient range of master's programs directed at advanced study in nursing available in Alberta: "The only MN program in Alberta in which students are currently enrolled is in the area of 'Acute Illness'" (p. 8). The joint submission indicated that less than 1% (86) of Alberta's 12,000 Registered Nurses then held master's degrees, and of these, the vast majority had obtained their degrees outside of Alberta (p. 2).

The joint submission also emphasized the need for specialization in nursing and acknowledged that "A longer period of study than in the past is presently necessary for mastery of even a portion of the knowledge base applicable to professional practice, a situation true in most fields" (pp. 1-2). Graduate study was perceived as essential to ensure continued development of new knowledge and the application of existing and emerging knowledge.

The Task Force (Report, 1975) had earlier recognized that preparation for specialized nursing functions, such as teaching of nursing, took place at the graduate level, and had, in recommendation #55, advocated "That the Master's level become the minimum educational preparation for nurse educators; that this is to be accomplished as soon as possible" (p. 121). To support this development, the Task Force advised, in recommendation #18:

> That the faculties of the University of Alberta and the University of Calgary develop in the very near future, Master's degree programs for the preparation of teachers of nursing, clinical nursing specialists and administrators of nursing service. (p. 116)

Presently, in Alberta, only a limited proportion of nurse educators possess master's level education.

The Canadian Context

Some of Canada' nursing educators will likely continue to be prepared at the master's level within the country. Others will likely continue to participate in master's in nursing and the doctoral programs available in the United States, since Canada has to date no doctoral programs in nursing. As Symons (1975) has noted, however, graduates of health care programs, including nursing, must be attuned to ". . . the actual social context in which the graduates will be practising their profession" (p. 205), in order to more closely relate health care in Canada to the Canadian context. The particular need for Canadian-prepared nurse educators is highlighted by Symons' observation that:

> . . . educators must assess teaching programs in the health sciences in the light of the community functions most of their graduates will be asked to perform. Slowness or reluctance to do this on the part of those responsible for professional education will often mean that changes in curriculum content or emphasis are made in erratic fashion, in response to well-meant but uninformed public or political pressure, rather than by planned anticipation of public needs properly related to a balanced programme of instruction. (p. 209)

Although speaking about doctorally prepared Canadian nurses, Ginette Rodger, representing the Canadian Nurses' Association Board of Directors at the November, 1979, Kellogg National Seminar on Doctoral

Preparation for Canadian Nurses, supported the concern about differences in national health care systems, when she observed that Canadian nurses educated in the United States have had to adapt their knowledge to conditions when they returned to Canada (Zilm, 1979, p. 45).

PURPOSE AND SUBPROBLEMS

Purpose

The purpose of this study was to provide data germane to the planning of master's level programs in nursing, in Alberta, through examining characteristics of Alberta nurse educators, their interest in participating in a special purpose master's in nursing program for Alberta nurse educators, and their perceptions of goals which should be addressed, and the operational characteristics of such a program.

Subproblems

1. What are the personal and professional characteristics of the nurse educators in Alberta?

2. What is the extent of interest among Alberta nurse educators in pursuing a special purpose master's in nursing program designed for Alberta nurse educators?

3. What do Alberta nurse educators perceive as potential facilitators and barriers to their participation in a special purpose master's in nursing program?

4. What should be the goals of a special purpose master's in nursing program as perceived by Alberta nurse educators?

5. What descriptive program characteristics are perceived by Alberta nurse educators as being important for a special purpose

master's in nursing program?

6. Are there any statistically significant mean differences among Alberta nurse educators in their perceptions of the importance of possible goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators?

SIGNIFICANCE OF THE STUDY

This study contributed data which may be helpful in planning graduate level nursing programs in Alberta. It focuses on perceptions of program needs as expressed by a potential client group--current Alberta nurse educators--and it clarifies the importance of possible goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators, as perceived by this group.

This study expands the data base provided by two previous studies involving some selected aspects of graduate level education in nursing in Alberta. As a result of a questionnaire survey of opinions of directors of nursing of Alberta general acute hospitals of one hundred or more beds concerning their perceptions of existing and potential need for acute nursing specialists prepared at the master's level in nursing, Stinson (1971) concluded that, by 1976, 34 such positions would be available. This number included 23 positions then open to master's prepared acute nursing specialists, plus an additional 11 positions. Andrews (1978), as part of a study commissioned by the Alberta Association of Registered Nurses to assess educational needs of registered nurses in Alberta, found that

100% of Alberta's schools of nursing--hospital, college and university--expressed a need for nurses prepared at the master's or doctoral level (p. 25).

DEFINITIONS OF TERMS

Special purpose master's in nursing program for Alberta nurse educators. A first level graduate degree program emphasizing the study of nursing and the teaching of nursing, and requiring a baccalaureate degree as one of the prerequisites.

Nurse educator. An individual who has, at a minimum, educational preparation at the diploma nursing level, and who is currently employed either full- or part-time as a teacher or as an administrator in an institution preparing nurses in diploma or degree programs, or who is engaged in nursing inservice/staff development activities in a health care agency.

Significant inducements. Situations and program characteristics which might promote participation of Alberta nurse educators in a special purpose master's in nursing program.

Barriers. Situations and program characteristics which might impede participation of Alberta nurse educators in a special purpose master's in nursing program.

ASSUMPTIONS, DELIMITATIONS AND LIMITATIONS

Assumptions

1. Baccalaureate level education in nursing prepares a beginning professional practitioner. Master's level education in

nursing prepares a specialist in some phase of nursing, including specialized functions such as teaching.

2. As potential master's in nursing program students, current Alberta nurse educators have educational and professional needs which should be considered in the planning of Alberta master's in nursing programs.

Delimitations

The study was confined to nurse educators functioning as teachers or administrators in schools of nursing, or engaged in inservice activities in health care agencies in Alberta at a particular point in time. Perceptions of nursing service administrators, nursing consultants, nursing researchers, or nursing clinicians concerning important goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators, were not explored. The special purpose master's in nursing program for Alberta nurse educators did not refer to any specific program proposal under consideration by any university in Alberta. The investigator did not explore perceptions of important goals and characteristics of master's in nursing programs intended to prepare nursing administrators, consultants, researchers or clinicians. Non-nursing master's level programs were not considered. Post-baccalaureate diploma or certificiate courses in nursing, post-master's programs in nursing, doctoral or post-doctoral programs in nursing, were not considered.

Limitations

The study was limited by the scarcity of research findings, either Canadian or American, relating to the topic of master's level education in nursing. Most of the program goals and characteristics selected for inclusion in the study emanated from American publications; they may not have been totally appropriate to the Canadian or Alberta context. Not all possible goals and characteristics of master's in nursing programs were presented to the respondents. Since all of the respondents were nurse educators, some preselection of goals and characteristics of a master's in nursing program occurred, eliminating some of the goals and characteristics which might have reflected primary interest in preparation for the roles of nurse-administrator, nurse-clinician, nurse-consultant or nurse-researcher.

The respondents represented a segment of the potential population of nurses who might be expected to be interested in a special purpose master's in nursing program for Alberta nurse educators. Nurses currently employed in other than educational settings were not polled. Nor were present baccalaureate in nursing students asked to participate.

OVERVIEW OF THE REPORT

The remainder of this report is divided into four chapters. Chapter Two presents a review of the literature related to master's level education, generally, and master's level education in nursing, specificially, with emphasis on trends, problems and issues affecting master's level education in nursing. Chapter Three describes the

instrumentation and methodology utilized in the study and Chapter Four reports the study findings. Chapter Five presents a summary of the study, conclusions resulting from the study and implications for program planners and for further research.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

This chapter explores the topic of purposes and characteristics of master's level education in nursing, reviews trends in general master's level education and nursing master's level education, and discusses issues and problems specific to master's level education in nursing.

STATED PURPOSES AND CHARACTERISTICS OF MASTER'S LEVEL EDUCATION IN NURSING

Development of graduate curricula in nursing is acknowledged to rest upon beliefs and philosophies underlying statements of the purposes and characteristics of graduate education in general, and graduate education in nursing, specifically (Lodge, 1975). The statements relating specifically to nursing most frequently cited in Canada, as well as the United States, are those of the American Nurses' Association and the National League for Nursing. The American Nurses' Association (1969) asserted that: "The major purpose of graduate study in nursing should be the preparation of nurse clinicians capable of improving nursing care through advancement of nursing theory and science" (p. 2). The National League for Nursing provided in Master's Education in Nursing: Route to Opportunities in Contemporary Nursing 1978-79 a wider interpretation by stating:

> The purpose of master's education is to prepare professional nursing leaders. These are the clinical specialists (advanced nurse practitioners), teachers, supervisors, and administrators

> whose special knowledge and skills are required now, and will continue to be required in the future in order to meet our nation's nursing needs. (p. 2)

With respect to characteristics of master's education in nursing, the National League for Nursing stated that master's education is distinguished by concentrated study in nursing and by study and application of appropriate research methodologies in the investigation of a particular nursing program (NLN, 1978). Further, NLN-accredited master's programs combine study of a clinical area with study of a functional role.

Inherent in the National League for Nursing statements concerning the purpose and characteristics of master's education in nursing is the belief of the Association that baccalaureate nursing education is the generic program to prepare a beginning professional nursing practitioner and the master's degree program should prepare nurses for areas of specialization (McMullan, 1977, pp. 4-5).

The structure of knowledge within nursing is, for various reasons according to Lodge (1978), still in a fundamental state and graduate education in nursing lacks structure and pattern. Mereness (1977) expanded on the troublesome problems confronting the developers of graduate curricula in nursing by noting that nursing practice was not yet clearly defined, lacked a body of knowledge uniquely applicable to nursing and lacked a theoretical framework to provide a direction to the organization of curriculum content. Lacking these essential ingredients for the development of sound curriculum which is founded upon validated, essential knowledge and a careful analysis of nursing practice, the profession has come to rely upon the statements of

purposes and characteristics of graduate education in nursing published by the American Nurses' Association and the National League for Nursing in the United States (Mereness, 1977, p. 32).

In Canada, there exists at the present no position paper at the national level specifically related to purposes and characteristics of graduate education in nursing. The Canadian Nurses' Association included references to master's level education in other statements such as Specialization in Nursing, The Expanded Role of the Nurse, The Nurse-Midwife and Social and Economic Welfare of Nurses. In a paper presented during the proceedings of the Kellogg National Seminar on Doctoral Preparation for Canadian Nurses, Allen, Cox and Parker (1979) outlined the position of the Canadian Association of University Schools of Nursing concerning the development of graduate education in nursing with particular emphasis on doctoral preparation, and stated that:

> It is necessary then that at the master's level we focus on the education and development of nurses highly skilled in the practice of nursing, while at the doctoral level clinical involvement is confined to that necessary to the research enterprise. (p. 35)

At the provincial level, the Alberta Association of Registered Nurses is currently involved in developing a position paper on graduate nursing education (A.A.R.N. Newsletter, 34(9), p. 5). The Report of the Alberta Task Force on Nursing Education (1975, p. 85) made no attempt to specify the exact nature of the content of nursing programs leading to master's and doctoral degrees. Implicit in its assessment of the whole area of graduate study, however, were the assumptions that: (1) the candidate has achieved distinction in the

basic areas of a discipline to the level of a university degree; and (2) capacity and motivation are sufficient to permit research and further study with a degree of independence. The Report further identified three main elements in preparation for a master's degree: (1) study of graduate-level courses related to a select program; (2) review of the literature in the area of specialization; and (3) concentrated research on a defined topic. Focus of graduate programs in nursing could be on any one of four distinct areas of study: (1) specialized clinical nursing; (2) community health nursing; (3) clinical nursing administration in a large hospital or health unit; and (4) nursing education.

Although less specific than the National League for Nursing statements concerning purposes and characteristics of master's education in nursing, The Report's description of nursing education at the master's level was not inconsistent with the former. The American Nurses' Association statement was still narrower than views expressed either by The Report or by the National League for Nursing, however, which may account for it being less frequently cited in Canada than the NLN stance.

Neither the NLN stance nor the views expressed by The Report conflict with Kelley's (1977) analysis of past views on graduate education which indicated several different purposes for such education. One traditional purpose was cited as being the transmission of the ideals of the society or civilization; another was the development of intellectual and cultural man; next was the pursuit of knowledge; and last, the facilitation of learning. Graduate education was

distinguished from undergraduate work by career commitment, specialization, focus on a discipline, development of critical and analytical abilities, and training in research (Report of a Task Force on Graduate Studies and Research in the Humanities and the Social Sciences, 1975, pp. 6-7).

TRENDS IN GENERAL MASTER'S LEVEL EDUCATION AND NURSING MASTER'S LEVEL EDUCATION

In viewing the overall development of master's education in nursing, the general condition of higher education, particularly graduate education, provides a ready frame of reference (Carl, 1975). Dunlap (1971) noted that graduate education in nursing embodied the characteristics of graduate education in general, as well as the specific characteristics of professional education.

Enrollment Increases

The decade of the sixties brought unparalleled growth in enrollments in postsecondary educational institutions in Canada as well as in the United States. Sheffield (1970) stated that the exponential rate of growth in university enrollment in Canada, which continued through the sixties, resulted from the rapid increase in population and the increasing popularity of attendance at university. This, in turn, he related to the growing number and variety of careers open to university graduates and the increased social prestige attached to the university experience. Enrollments in graduate programs in Canadian universities since 1960-61 increased dramatically, and the Organization for Economic Co-operation and

Development (1976, pp. 85-86) noted that, in 1973-74, 10,310 master's degrees were granted, compared with 2,227 in 1960-61. The overall number of graduate students in Canadian universities rose from 6,500 to over 33,000 during the sixties, which was an increase of 409%, and the graduate enrollment in 1975 was estimated to be about 5% of the 22 to 24 age group (O.E.C.D., 1976, p. 211).

Prior to the decade of the seventies, Canada had relied on foreign programs at the graduate level to supply much of her highly trained manpower. Canadians went abroad to pursue graduate studies, and there was large-scale immigration of graduate trained personnel for the universities, industry and government (O.E.C.D., 1976, pp. 85-86; Report of a Task Force on Graduate Studies and Research in the Humanities and the Social Sciences, 1975, p. 6). This trend was particularly obvious in nursing education, since the first Canadian master's program in nursing did not start until 1959 (Canadian Nurses' Association, 1968, p. 92). As of December 31, 1978, there were 175 full-time and 95 part-time students reported enrolled in Canadian master's in nursing programs (C.A.U.S.N. Newsletter, May-June, 1979, p. 2).

Professionalization of the Master's Degree

In reviewing the evolution of the master's degree, Berelson (1960) noted that since the beginning of the twentieth century there had been concern and discussion about the nature of the master's degree. Historically diverse in its nature, "the very diversity of the Master's degree troubles those people who want a degree to mean one thing only, or at most a very few" (Berelson, 1960, p. 185).

The master's degree was given in a large number of forms (Berelson, 1960; Grigg, 1965; Mayhew, 1970; Snell, 1967; Thompson, 1963) and it was given for a wide range of work--another year of course work with no general examination (the so-called fifth year of undergraduate study), no thesis or "essay," and no foreign language; a two-year professional program as in business; even a three-year program in the history of fine arts, where it was recognized as being a strong degree (Berelson, 1960, p. 186). Berelson (1960) summarized the diversity of the master's degree by stating:

> Whether the Master's is academic or professional in character makes a big difference in what it "means." In many academic fields, the Master's is given to a candidate on the road to the doctorate almost automatically, and certainly with little detour or cost of time. In many professional fields or parts of them, the Master's is, or may be on the way to becoming the first professional degree, e.g., in engineering, business, social work, library science. In such fields, it is the capstone to the final year of what is essentially a five-year program of study. In many academic fields, it is the terminal degree mainly in cases of discouragement and consolation; in most professional fields it is terminal by design. (p. 186)

Grigg (1965) agreed with Berelson's assessment that in academic fields the master's degree had been "downgraded," although he recognized that it was still of significance for certain professional groups. The continued expansion in types and numbers of master's programs, as well as the academic world's increased demand for Ph.D. preparation, contributed to the lack of status associated with the master's degree, according to Grigg (1965, pp. 56-57).

The "devaluation" of the master's degree was decried by Snell (1967), Carmichael (1961), Thompson (1963), The Report of the Task Force on Graduate Studies and Research in the Humanities and

the Social Sciences (1975), as well as by others. Thompson (1963, pp. 100-101) recommended that if a non-research post-baccalaureate degree was desired, it should be established straightforwardly as another degree, not through the modification or deterioration of the master's degree. Mayhew (1970) perceived an important question to be: "Does the master's degree become a screening device as the bachelor's degree has been in the past, and if not, what should be its purpose" (p. 32)? The master's degree has generally become associated with professional practice rather than academic scholarship (Berelson, 1960, p.187).

Mayhew and Ford (1974, p. 91) differentiated between the broad, general areas of professional and graduate education by observing that while professional education had as a major goal "effective practice," graduate education did not. The rise of professional research and teaching preparation was described by McGlothin (1964) thus:

> Professional schools grew largely out of the demands of the professions for trained persons. In their simplist forms, they prepared new entrants for the professions and did little with education for research or education for teaching. More recently professional schools have consciously accepted the obligation to educate students for careers in research and for careers in teaching, as well as for practice. (p. 104)

Berelson (1960, p. 220) concluded that there had been a mutual infiltration of academic and professional work at the graduate level. The growth of professional fields had meant a growing demand for professional training at the graduate level and at the same time the development of applications in academic disciplines had meant the growth of professional work within them.

Mood (1973, p. 52) alluded to another aspect of the increasing demand for graduate professional education when he identified, as a force tending to upgrade careers on the status ladders, the members of an occupation desiring higher status and organizing and lobbying for higher education requirements to enter the occupation. He specifically cited the case of nursing as an example.

In his paper on education in the professions, Millerson (1973) observed that high status was initially achieved and eventually ascribed. He asserted that occupations indeed take deliberate action to become professions and that they tend to develop a sense of group consciousness resulting from efforts to define their specialism as a basis for full-time work. Millerson (1973) stated further:

> The status of a profession is based largely on a claim to specialized knowledge acquired through advanced training and education, although the standing of the profession in the society may, in the end, depend on its assessed value by users and nonusers. (p. 1)

In addition to raising the level of entry into the occupation, occupations undergoing a process of professionalization also rely heavily on raising the standard of competence acquired through training and education (Millerson, 1973, p. 1). The role of graduate education in improving the status of nursing was acknowledged by Grace (1978) who, in tracing the development of American doctoral education in nursing, acknowledged that in addition to providing a means of acquiring scientific authority for the foundation of nursing practice, "Doctoral education <u>for</u> nurses and <u>in</u> nursing is part of a political process to secure for nurses a position of authority within the larger health care system" (p. 112).

Seldon (1975) warned against health professions succumbing to the "sweet, beguiling music of the Sirens of Academia" as they become more and more involved in the successive levels of higher education. He noted, as well, that these professions would not admit that they hoped by advanced education, to elevate their field of practice to a higher position in the pecking order and also gain greater financial remuneration.

Reacting to the idea of doctoral programs for nurses, as presented at the November, 1978 Kellogg National Seminar on Doctoral Preparation for Canadian Nurses, Dr. Alan Dyer, assistant deputy minister in the Ontario Ministry of Health, appeared to support Seldon's stance when he said that he had the impression nurses wanted doctoral programs in nursing because these would improve their image and status (Zilm, 1979, p. 47).

Innovative Programs and Policies

Graduate education in the seventies has been in a state of flux, with both internal and external forces pressing for change (Dunlap, 1971; Schein & Kommers, 1972; Mood, 1973; Mayhew & Ford, 1975). Students began, vociferously in some instance, to question the relevancy of their programs of study, problems of articulation between undergraduate and graduate programs became more obvious, and university administration, often under fire from government agencies, sought to contain escalating costs. Mayhew and Ford (1974, p. 223) condemned American graduate education for not meeting the educational needs of students not interested in, or geared to,

research or teaching, and for being unresponsive to the needs for reeducation and retraining of people in formal extension work. In a report prepared for the Carnegie Commission on Higher Education, Mood (1973, p. 53) recommended that higher education must stop simplifying its task and start serving its clientele. In Canada, Sheffield (1970) addressed innovation from the broad base of all postsecondary education when he said:

> It seemed likely that post-secondary education would become even more democratized--both in the sense of serving a greater proportion of the people and in that of involving in its governance more of those concerned with its operation. Above all, it seemed desirable that there be a renewed emphasis on the human aspects of higher education--more attention to teaching and learning and to individual development. (p. 440)

Individualization of learning has become one of the attempted areas of innovation in graduate education, although many would argue that graduate education, by its very nature, is already quite individualized in comparison to undergraduate education. The traditional model of fairly intense student-professor-advisor interaction which forms the basis of graduate level education, is almost completely lacking at the undergraduate level. Hayes (1976) seemed not in complete agreement with this view of graduate education when she remarked that:

> Central to treatment of new foundations, methodologies and philosophies of graduate education is being cognizant of the fact that today's student wants to create his own learning goals within a well defined personal framework of career mobility--a most compelling strain on the traditional curriculum. (p. 13)

Smith (1971) stated that "The pressure is on to undertake broad and intense reforms in all of higher education, and advanced nursing education is not spared this mandate" (p. 3). Moxley and

White (1975) were somewhat more vociferous in their condemnation of graduate education in general, and American graduate education in nursing, in particular, which had demonstrated a particular lack of sensitivity to society and students. They felt that when nursing entered the mainstream of graduate education, it accepted practically all the existing traditions and was not later responsive to diversity of the contemporary student body in knowledge, skills, attitudes, learning, and basic educational preparation. To meet the challenge of the future, Moxley and White suggested: (1) evaluation of various life-work and continuing education experiences for college credit; (2) interdisciplinary learning-teaching strategies; (3) challenge examinations in selected graduate course offerings; (4) extended degree programs; (5) self-paced learning through the use of computers; and (6) work-study programs for college credit, as nontraditional learning strategies.

Wilson and Chater (1973) acknowledged that while considerable ferment was occurring in baccalaureate nursing education in the United States, graduate education in nursing had remained very traditional with students and faculty selected and rewarded by conventional criteria and measurements and content arranged according to traditional categories and conformity, rather than with quality as the end result. Although she asserted that recently, major strides have been taken in making nursing more accessible, flexible and individualized, Lenburg (1976) also noted the conflict of elitism and egalitarianism in nursing, when she observed:

> The professional leadership is struggling to move nursing toward a higher and more acceptable status, which at least in

> part involves increasing the expansion of nursing knowledge and function and increasing control over this process. This means exerting controls over entry into the professional community and therefore over the educational system. It is here the conflict with egalitarianism emerges. (p. 159)

Specific examples of two nontraditional approaches to delivery of nursing education at the master's level recorded in recent literature involved application of the consortium concept. Chater (1975) described a consortium of nursing units from 12 universities located in California and Nevada which was formed in 1971 for the purpose of improving graduate education in nursing through cooperative and innovative efforts. As Chater (1975) observed:

> The interinstitutional arrangements that characterize COGEN [Cooperative Graduate Education in Nursing] capitalize upon the diversity of strengths within each institution thereby expanding opportunities for students and faculty through more effective use of resources, facilities, and programs. (p. 630)

Baccalaureate as well as existing and planned master's programs were included to enable collaborative planning for improved articulation. Although Chater (1975) acknowledged that consortia cannot solve all the problems of member units, she stated that they can ". . . give us one solution to the problems of increasing costs and student mobility by sharing resources and increasing options for students and teachers . . ." (p. 632).

Cobin, Traber and Bullough (1976) described a multiple-entry, multiple-exit career ladder consortium located in southern California which involved seven departments of nursing and one medical school, located in five community colleges and three universities. The plan provided nursing education from the aide level

through a master's degree in nursing. In Canada, there are to date no similar endeavors, although Mussallem (1965) had recommended regional planning of graduate programs in nursing ". . . so that the limited resources available can be fully utilized" (p. 139). Similarly, through its Board of Directors, the Registered Nurses' Association of British Columbia (1971) endorsed the following recommendation proposed by the Committee on Nursing Education:

> It is recommended that:
> 1) a collaborative approach be used by Canadian universities developing masters programmes in nursing to insure quality of the programmes, to avoid duplication of effort and to enable optimum utilization of resources. (p. 23)

The rationale for this recommendation was expressed as being to enable Canadian nurses to remain in Canada rather than having to go to the United States to pursue graduate study in nursing, and to provide Canadian nurses with as wide a choice as possible of graduate programs within their own country.

Trends Specific to Master's Level Education in Nursing

Initially, master's level education in nursing developed in the United States and Canada to prepare nursing teachers, supervisors and administrators (Campbell, 1964; Hart, 1962; Nahm, 1973; McLane, 1978; Hoexter & McGriff, 1971; Grossman, 1972). This focus was referred to in the literature as preparing for function, or functional orientation (Campbell, 1964; Hart, 1962). The emphasis in functionally oriented programs at the graduate level, ". . . is not upon substantive content of the discipline, but upon methodologies and knowledge necessary for teaching and administering the discipline" (Grace, 1978,

p. 118). Nahm (1973, p. 299) noted that the development of master's and higher degree programs in nursing rested upon evolution of a sufficient pool of baccalaureate graduates with a major in nursing. As the objectives of the baccalaureate program in nursing became clarified and it was seen that the basic baccalaureate should, on graduation, be prepared as a generalist, rather than a specialist, in nursing, preparation for administration and teaching began to occur at the graduate level (Nahm, 1973, p. 300). With the increased growth of university programs in nursing came a concurrent need to prepare nurses for teaching and administrative positions in universities, and master's degree programs in nursing were created and expanded to meet this need (Grace, 1978, p. 116).

In the early sixties, in the United States, study of an area of clinical nursing as specialization began to evolve (Campbell, 1964, p. 88). This was sometimes referred to as a role, rather than a functional orientation, in the literature. By the early seventies, in the United States, increased emphasis on advanced nursing practice or clinical specialization in master's programs in nursing, was occurring (Hoexter & McGriff, 1971; Grossman, 1972). This increased emphasis on clinical specialization at the master's level was undoubtedly encouraged by statements such as that of the American Nurses' Association (1969) which asserted that "The major purpose of graduate study in nursing should be the preparation of nurse clinicians capable of improving nursing care through advancement of nursing theory and science" (p. 2).

The shift in emphasis in master's level education in nursing

from teaching and administrative preparation to that of clinical specialization was believed by Smith (1971) to be in recognition of three important factors: (1) a rapidly expanding body of medical, nursing and supporting knowledge; (2) advancing technologies; and (3) the highly complex and rapidly changing health care institutions and agencies. Bergersen (1971) partially supported this view with the following explanations:

> To cope with the proliferation of knowledge and rapid technological change requiring highly specialized skills, the professions have resorted to the adage of "divide and conquer." Thus, the advent of the clinical specialist with ensuing issue of how to prepare a nurse to be a professional clinical specialist. (p. 21)

A slightly different interpretation of the development of master's level clinical nursing specialties was perceived by Nuckolls, Ferholt and O'Grady (1975), who stated that "These programs were designed to prepare clinical specialists who could improve care in hospitals by serving as role models and by working to improve the skills of staff nurses" (p. 2).

While this shift in focus of master's in nursing programs from teaching and administrative preparation to that of clinical specialization as the primary advanced area of interest is occurring in Canada, it may have developed more slowly and less pervasively than in the United States. (A summarization of the number of master's in nursing programs and their enrollments and graduations in Canadian universities by focus of program, for the years 1966 to 1976, appears in Appendix A.)

Another trend in master's level education in nursing, noted by Campbell (1964), was the reversal in nursing education of the usual

pattern of content flow. She observed that:

> The content of educational programs is rarely static. Usually, there is a process of progressive flow of content or subject from the higher into the lower educational divisions. This has not occurred in nursing, although we identify many educational levels in the field. The development of college programs in nursing transferred the subject of the single-purpose school to the college setting. With the development of the nursing major, the subjects of the baccalaureate specialized programs were transferred to the master's level. With the development of clinical nursing as a subject of study in master's programs, the functional areas of study are beginning to appear as electives, minors, or as post-master's focus. (p. 89)

Campbell did admit that many meanings could be assigned to this reversal of the usual. She speculated that pressures of custom and environment may have been such that only through such an upward process could sufficient background knowledge and freedom be gained to examine nursing. Ozimek (1975) expanded Campbell's observation about the reversal of content flow in graduate education in nursing, and prophesied that, in the future in the United States, the master's degree programs in nursing would prepare the generalized professional nurse practitioner and that doctoral degree programs in nursing would prepare clinical nursing specialists, researchers, scholars, administrators and consultants for nursing. Nahm (1973) supported the notion that "if basic preparation for professional nursing practice were offered at the master's rather than almost entirely at the baccalaureate level, many desirable outcomes now not achieved would be forthcoming" (p. 323).

Since Canada has, to date, no doctoral programs in nursing, the preceding trend has not been as evident in this country as it has been in the United States. However, as Hart (1962), Allemang

(1974) and Street (1974) have pointed out, a close relationship historically has existed between Canadian and American nursing, with the result, that at least in the past, similar patterns of nursing education evolved in both countries. In particular, Allemang's historical review of Canadian and American nursing education, reinforced Campbell's observation that nursing's flow of content in educational programs has been from the lower to the higher.

ISSUES AND PROBLEMS IN MASTER'S LEVEL EDUCATION IN NURSING

Specialization

In considering increasing specialization related to professional education, Schein and Kommers (1972) remarked that "It is a phenomenon inherent in the development of disciplines that as more knowledge is accumulated, it can only be stored and transmitted by first being differentiated into new subunits of manageable size" (p. 46). Bergersen (1972) supported this view in relation to the advent in nursing of the clinical specialist. Schein and Kommers (1972, p. 46) also saw the differentiation into subspecialties within major professions as being of even greater importance than the initial development of the professions.

A historical perspective for the development of specialization in the education of students in the health professions was provided by the Centre for Educational Research and Innovation of the Organization for Economic Co-operation and Development (1975). The OECD (1975) noted that:

> Between the mid-1800's and 1940 the education of physicians, dentists, nurses and pharmacists underwent a series of changes—from largely apprenticeship training to formalized instruction in organized faculties and schools, from a heavy bias towards skills to sequential curricula beginning with so-called basic sciences and terminating with clinical studies and the acquisition of professional skills. . . . After the 1930's it became increasingly necessary to prepare students for specialized roles within professions. . . . An immediate consequence of this move to specialization was a reformulation of the objectives of professional education. . . . these new objectives recognised the need to provide an initial general basic education directed towards sound reasoning, the use of scientific methods specifically designed for biological problems, the development of insight into the organisation of biological systems and their interaction with the environment, and not least "learning to learn" in laboratory and clinical situations. Following this period of general basic education came professional training to provide the particular knowledge and skills necessary for practice in the various growing specialty areas. (p. 43)

Although Mayhew and Ford (1974) supported specialization in graduate education as a pre-condition for the discovery of new knowledge and for making contribution in a given field, they did acknowledge that this preoccupation with specialization may have been overdone, with resultant psychological damage to the student. Mayhew and Ford (1974) recommended that "The time has arrived to reconsider the concept of specialization and to devise ways in which to better serve the growth of the individual graduate student as scholar, teacher, or human being" (pp. 220-221). Rather than observing rigid departmental boundaries, emphasis should be on diverse ways of looking at problems—an awareness of what must be learned in order to deal with the understanding of bodies of "evidence," the concepts, and theories which are relevant to a particular problem.

The Centre for Educational Research and Innovation (1976) called for a new pedagogical orientation for professional education not only on the grounds of concern for the individual, but also

because of concern for the health care delivery system. Specifically, the Centre (1975) reported that "As specialisations and subspecialisations have proliferated, and as procedures for accreditation and licensing have multipled, rigidities and hierarchies have multiplied" (p. 76). There existed little or no opportunity for the individual's mobility and transfer and too many narrowly trained professional groups resulted in dysfunctional divisions of labour.

In challenging the areas of specialization usually prescribed for the entering graduate student in nursing, Wilson and Chater (1973, p. 442) proposed that new combinations and modes for specialization be considered--ones that combined traditional clinical areas with traditional functional areas; that reflected and evolved from the student's own research interests; and that mirrored the complexity of the community or environment in which the student planned to practice. The rationale for such "specialization" rested in the belief that the knowledge base of nursing had still to be built and the inquiry process and the activities which produced knowledge might very well be considered as the primary academic substance of graduate nursing education. Palmer (1972) supported this stance.

Most nurse educators agree that nursing should be the major focus of the master's in nursing program, and that one cannot become an expert practitioner without practicing nursing (Grossman, 1972, p. 467). What appears to be currently debated is the exact nature and degree that such nursing focus should take (Blair, 1976; Hoexter, 1976, McKay, 1971; Donley, Jepson & Perloff, 1973; McLane, 1978; Bergersen, 1971; Kramer, 1975). Hart (1962, pp. 25-26) had defined

a specialized program in nursing as one which included preparation for a specialized function, setting, or clinical field and a generalized one as a nursing program that prepared for the beginning practice of professional nursing in any setting. Generally, agreement exists that the master's in nursing should be a specialized degree and that the baccalaureate degree should remain generalized (Hart, 1962; Allemang, 1974; Boone & Kikuchi, 1977; Awtry, 1975).

While asserting that it is to nursing's credit that sophisticated levels of clinical practice and research have been developed, Blair (1976) advised that nursing needed to develop a parallel sophistication in organizing and managing the resources and systems in a way that would enable nurses to utilize their clinical expertise to the fullest. She specifically proposed that graduate students in nursing receive administrative preparation along with their study of clinical nursing. Although she did not advocate abandoning the emphasis on study of clinical nursing, Blair (1976) did point out that:

> During the past decade graduate students in nursing have had few formal opportunities to develop a conceptual base for administrative practice geared to creating and maintaining systems in which quality nursing care can be delivered. The result of these years of drought are now evident in the dearth of nurse administrators with the broad knowledge base and sophisticated skills that are necessary if nurses are to influence the scope and direction of health care delivery systems in this country. (pp. 550-551)

At the thirteenth biennial convention in 1977 of the National League for Nursing in the United States, the membership approved an association resolution "In Support of Administration of Nursing at the Master's Level," which resolved that NLN support the development

of adequate numbers of master's programs with an area of concentration in the administration of nursing and promote nursing service administration as a career goal within the nursing profession.

Kramer (1974) remarked that with the trend in graduate nursing education of placing major focus on advanced clinical practice had come a concommitant de-emphasis on preparation for teaching, administration, supervision and consultation. Preparation of graduate nurses with advanced clinical skills but little or no opportunity for the nurse to learn the parameters of an institutionalized role in which to successfully practice these skills, Kramer likened to going on a trip with underwear, shoes, dresses, and jewelry, without a suitcase into which to put them. Kramer (1974) added:

> Unfortunately, even the most progressive faculties are just now beginning to realize that the knowledge of a discipline must be analysed and specialty areas identified on two dimentsions--the content specialty domain as well as the vehicle or functional domain through which the content specialty will be delivered. . . . Either domain can be primary; my point is that both are needed. (p. 19)

In responding to the position taken by some faculty that a program that emphasized expertise in clinical knowledge and research methodology was sufficient background for future practice as either a clinician, teacher, or administrator, McKay (1971) pointed out that the major premise upon which this argument rested, was that knowledge of the subject area was the essential qualification for a teacher. McKay argued that "While this is a <u>necessary</u> requirement without doubt, the question arises as to whether it is a <u>sufficient</u> one" (p. 15). Further, McKay (1971) recommended:

> If the range of leadership roles in nursing, clinical specialization, teaching, supervision, and administration includes instructional responsibilities, it is strongly recommended that this content be available in the graduate programs which prepare individuals for these roles. (pp. 16-17)

The rather obvious point that some master's prepared nurse practitioners or nurse clinicians are expected to teach and administer, as well as to practice, has been conceded (Anderson, Leonard & Yates, 1974).

As a result of a questionnaire survey in 1971 of nurses who had master's degrees in clinical nursing, Donley, Jepson and Perloff (1973) found that almost 60 percent of the respondents stated that they would prefer a graduate program in nursing that included a functional as well as a clinical orientation. Donley et al. concluded that emphasis on clinical nursing science not balanced by functional preparation might produce a practitioner of nursing unable to function in the whole of the health care scene, while preparation of teachers or administrators with only minimal clinical expertise developed a practitioner without a field of practice. Donley et al. (1973) added:

> The complex relationships between clinical nursing and functional role preparation produce a whole which is indeed more than the sum of its parts. Perhaps the nurse whose preparation represents a blend of clinical nursing, nursing education, and nursing administration, in a pattern which she helps construct, will be better able to function effectively and efficiently today and tomorrow within the total health care system. (p. 649)

McLane (1978), following a study to identify the common core that should be included in a master's in nursing program, concluded that competencies required of all master's prepared students, regardless of their area of clinical concentration or functional-role goal were: (1) high degree of interpersonal competence; (2) ability

to communicate a philosophy of nursing; (3) ability to think inductively as well as deductively; (4) competence in the whole area of quality assurance (peer evaluation, development and testing of outcome criteria, measuring and evaluating quality of nursing care); and (5) facility as a change agent. With regard to role specific competencies, McLane recommended that: (1) nurse specialists might better be prepared at the doctoral rather than the master's level; (2) content and learning experiences relative to learning theory, theories of instruction, teaching strategies, learner evaluation and utilization of a variety of technological devices, be included in the preparation of clinical nursing specialists, master nurse clinicians and nurse practitioners; and (3) that all master's prepared teachers of nursing be high level practitioners. She also suggested dual role preparation of practitioner-educator as a goal for graduate programs in nursing, but recognized that further study would be required to decide whether such a goal could be accomplished at the master's or doctoral level.

Bergersen (1971) had also advocated preparation of the clinical nursing specialist at the doctoral level, because she believed that master's level preparation could not produce a sophisticated enough clinical specialist. A doctorally prepared clinical specialist, according to Bergersen, would be able to readily absorb, synthesize and translate new knowledge into clinical practice, conduct her own research on health care problems and facilitate innovation that enhanced health care.

Professional or Academic Master's in Nursing Education

Traditionally, universities have incorporated scholarship and research into their academic goals. The advancement of knowledge through research has been an integral component of all academic graduate programs. Recently, a trend has developed by which those graduate students wishing a research orientation elect to continue on for a Ph.D.; however, many master's level programs, particularly those requiring theses, still incorporate a considerable research orientation. Professional graduate programs, on the other hand, have tended to prepare knowlegeable consumers of research at the master's level, rather than graduates capable of carrying on research in their own right. Nursing has been caught in the dilemma of whether to provide an academically oriented master's program with an extensive research component, or whether to provide a professionally oriented master's program characterized by the informed consumer approach to research (Grossman, 1972; Stinson, 1977; Ellis, 1971). Schlotfeldt (1975) remarked that during the evolution of master's in nursing programs, research training, if included, quite often had been seen as being separate and distinct from training for specialty practice, whether the latter represented preparation for nursing practice, teaching or administration.

Cleland (1975) advocated that nursing schools that had a graduate program terminating at the master's level would be well advised to focus on preparation of "evaluators" and utilizers of research. She felt that, within a profession, a good case could be made for such a faculty to concentrate on preparing practitioners

who could make appropriate use of research findings. Cleland (1975) maintained that "Decreasing the lag between the time when a research hypothesis is well supported and the time when it becomes commonly utilized in professional practice can be a very valid goal in itself" (p. 643). She added that she knew of no discipline or profession that claimed to prepare investigators at the master's level, and that in any of them only a handful of research investigators did not possess a doctorate.

Ellis (1971) believed that the knowledge and skill required to become an independent investigator and to critique research in any depth could not be obtained in the time reasonably allocated to the primary purposes of either the baccalaureate or the master's programs in nursing. She, too, felt that doctoral programs were the necessary locus for the latter level of research. Preparation at the master's level should be for a knowledgeable consumer of research.

Ackerman (1976) discussed four reasons often given for the study of research, including statistics, in master's programs in nursing. The first three reasons--(1) to prepare the student to enter and succeed in a doctoral program; (2) to enable the student to complete a required thesis, research project or comprehensive examination; and (3) to equip the student to do independent research after graduation--she refuted. With regard to the fourth reason--to help the student become a consumer of research, as evidenced by reading appropriate literature with understanding and applying what she has read in the practice situation--Ackerman (1976) said:

> This returns us to a question posed earlier, since what is appropriate to a nurse's role seems to depend on whether the master's prepared nurse is primarily a practitioner or primarily a researcher. The majority of professionals--whether teachers, physicians, nurse, or members of other disciplines--may not really be able to be both practitioner and researcher. (p. 757)

Ackerman felt that adherence to rigorous scientific thinking could be taught and should be the focus of the research component of a master's nursing degree, which in turn, should be a program to prepare practitioners.

Placing the issue of whether skilled research consumers or beginning researchers who can design and carry out studies independently, should be the focus of the research component at the master's level in nursing, in a Canadian context, Stinson (1977) argued that:

> From a practical standpoint, given the fact that Canada has only some forty nurses with doctorates and fewer than a thousand with master's degrees, the development of nursing research does, and will, depend very heavily upon nurses prepared at the master's level. On this basis alone, sound preparation in nursing research methods and statistics is a must in master's programs. . . . Whether or not all master's students should be required to do a thesis is still a controversial point. (pp. 29-30)

To this view, Kerr (1978, p. 206) added the observation that the approval of new programs by universities at the best of times, let alone at times of retrenchment, is unlikely without extensive evidence of substantial research activity in the particular school. Although they did not delineate the exact nature of the research component at the master's level in nursing, Allen, Cox and Parker (1979) did assert that ". . . since the doctoral program will focus on advanced research training, a foundation for this will have been laid at the master's level" (p. 35).

Experience Prerequisites

In the United States, graduate programs in nursing increasingly have assumed some of the characteristics of preservice education programs because of the nonexistence or dearth of work experience that graduate nursing students have had between baccalaureate graduation and entrance to a master's degree program (Kramer, 1974, p. 227). One of the reasons cited for this characteristic was the tremendous lack of nurses prepared at the master's level who could fill the many vacancies in nursing service and schools of nursing (Kramer, 1974 and Mereness, 1977). Another reason was the adoption of the trend practiced by many other university departments of encouraging able students early in their baccalaureate studies to choose electives with a view to graduate study and, where possible, to embark directly on that study (Registered Nurses' Association of British Columbia, 1971; Mereness, 1977).

Kramer (1974) questioned the validity of continuing the practice of admitting to master's in nursing programs, students with little or no nursing work experience:

> Are we improving the situation by staffing schools of nursing with faculty . . . who have not constructively managed the conflict between school-work values and who in turn teach the nurse of tomorrow maladaptive ways of dealing with the conflict they are bound to encounter? (p. 227)

Germane to the issue, Kramer felt, was the amount of interpersonal competence that was developed and used during the work experience, not the quality of the work experience.

Mereness (1975) concurred with Kramer's concern over the opportunities not provided for students enrolled in master's in

nursing programs immediately after graduation from the baccalaureate program, to resolve the professional socialization conflict. Additionally, Mereness (1975) believed that ". . . further educational development is jeopardized when such inexperienced nurse practitioners embark upon graduate study without first developing competence in clinical nursing through a work experience" (p. 639).

Accreditation

Philosophically, accreditation has been put forward as a mechanism through which a social institution, such as education, can be kept accountable to the society it serves (Ettaro, 1976). Likewise, the accreditation process in nursing education has been envisaged as a mechanism through which nursing can express its concern for society's health care needs and implement its programs for meeting those needs (NLN Policies and Procedures of Accreditation for Programs in Nursing Education, 1976; Ettara, 1976). One of the common arguments against accreditation of graduate programs was voiced by Cartter (1968, pp. 272-273) that, to be truly effective, accreditation would have to be quite explicit and restrictive in its standards and the more restrictive it was, the greater would be the opposition by the "better" institutions which would view this as unwarranted limitation on their freedom. Chater (1973) asserted that accreditation as utilized for programs in nursing by the National League for Nursing in the United States, was not narrow, inflexible, irrelevant to education or a hindrance to innovation.

Through its four departmental units--Department of Associate Degree Programs, Department of Baccalaureate and Higher Degree

Programs, Department of Diploma Programs and Department of Practical Nursing Programs--the National League for Nursing accredits the various educational programs in nursing in the United States.

Although the Canadian Nurses' Association passed in 1945 a motion approving the principle of accreditation, it was not until the Association's forty-third Annual Meeting and Biennial Convention in June, 1978, that further action was taken. At that meeting, a resolution that the Canadian Nurses' Association develop in collaboration with the Canadian Association of University Schools of Nursing, the Association of Canadian Community Colleges and other appropriate organizations a national accreditation program for nursing education programs, was passed. Prior to the June, 1978, Canadian Nurses' Association resolution on accreditation, the Canadian Association of University Schools of Nursing had untertaken an accreditation study, and the Association of Universities and Colleges of Canada and the Association of Canadian Community Colleges had formed a joint committee to study the practicability of establishing a permanent council to co-ordinate the accreditation of health sciences educational programs in Canada. Since the Canadian Nurses' Association's June, 1978 resolution on accreditation was passed, the Canadian Association of University Schools of Nursing and the Canadian Nurses' Association have jointly submitted to the W. K. Kellogg Foundation of Battle Creek, Michigan, a proposal for the funding of a project connected with accreditation of nursing education programs in Canada. Presently, however, there appears to be nothing on the horizon with regard to accreditation of graduate level programs in nursing, since the

joint C.N.A./C.A.U.S.N. project involves only educational programs leading to initial professional licensure.

In its Position Statement No. 1.10. Accreditation of Educational Programs in the Health Disciplines, the Canadian Nurses' Association (1975) differentiated clearly between approval, which it perceived to be a compulsory program based on minimum standards prescribed provincially, and accreditation, which it perceived to be voluntary, national in scope, and involving evaluation and recognition of a program of education.

Humanism in Master's Programs in Nursing

Hamilton (1975) remarked on the challenge to graduate education in nursing of integrating what she identified as the dimensions of scientism and humanism. On the one hand, the nursing profession needs research in order to investigate and enlarge the body of nursing knowledge. On the other hand, it had been suggested that humanism is the essence of nursing knowledge. Hamilton (1975) noted that:

> The challenge to the nursing professions is to discover how it can study and interrelate two dimensions within a humanistic posture so that posture is maintained in the preparation for and delivery of scientifically sound health care. (pp. 24-25)

She further suggested that re-emphasis of the social-behavioral sciences or perhaps some alteration in their direction and substance was indicated to integrate scientism and humanism within the graduate curriculum.

With regard to scientism and humanism in graduate nursing curricula, Lodge (1976) asserted the belief that nursing was in part a science, which proceeded on the basis of scientific knowledge which

is impersonal, self-conscious and self-improving, and in part an art, which is impersonal, self-conscious and self-improving, and in part an art, which is personal, intuitive, limited to the lifetime of the artists, with a strong emotional base and subject to interpretations. These dimensions should be considered in the structuring of nursing curricula.

Berry and Drummond (1970) also perceived masters' and doctoral programs built on a solid core of humanistic courses to prevent the specialization inherent in graduate level education from becoming an end in itself. Berry and Drummond (1970) asserted: "A liberal education in practice becomes a catalyst that engenders an unlimited scope of potential achievement" (p. 31).

Theories in nursing, the arts and the sciences, were viewed by Torres and Yura (1974) as being fundamental to all baccalaureate and master's in nursing programs, but the emphasis and selection of certain theories gave uniqueness to each program. Similarly, Schumacher (1977) identified liberal education, scientific education and technical education as part and parcel of the whole of nursing with one theme dominating at certain points, but always a melding of themes required.

Schein and Kommers (1972, p. 60) included in a summarization of common criticisms of professional education the statement that professional education generaly underutilized the applied behavioral sciences, especially in helping themselves to increase their self-insight, their ability to diagnose and manage client relationships and complex social problems, their ability to sort out the ethical and

value issues inherent in their professional role, and their ability to continue to learn throughout their career.

With regard to specialization, Heiss (1970) advised:

> Although the paramount interest of the graduate department is the production of specialists in the discipline, it should not permit the academic program or the process to become dehumanized in the interest of developing the discipline. (p. 275)

The graduate students surveyed by Heiss in her study frequently described their educational experiences as "dehumanized in the interest of scientism."

Nursing has been predominantly interested in the client's humanistic and emotional problems, conflicts and life stresses using nursing theory in relation to sociologic, anthropologic and psychologic theory and methods to study the human dimensions. Leininger (1974) maintained:

> The poignant issue is how and if humanism and scientism can come into a closer rapprochment and especially in providing quality educational programs with the ultimate goal of quality health care to people in our society. (p. 50)

Diversity of Master's Programs in Nursing

In asserting that there is much confusion today among educators, students and the public about graduate education in nursing, Hoexter (1976, p. 1) stated that current patterns of graduate education in nursing seemed to follow almost as many patterns as there were programs. There were programs that were: (1) almost totally clinically oriented; (2) oriented solely toward functions, i.e., administration or teaching; (3) a mix of both; (4) professing to prepare the specialist in a limited area often called the X nurse

practitioner; and (5) decidedly theoretical in focus. Mereness (1975) agreed that nurse educators were not in total agreement about the educational and experiential basis upon which graduate curricula should be developed and that there seemed to be little consensus as to the essential content which should be included in postbaccalaureate education. Ozimek (1975) decried the diversity in numbers and types of graduate programs in nursing and advocated that these should be carefully planned and controlled:

> It is not in the social interest to have great numbers of programs. It is more in the social interest to have quality programs rather than to spread the resources of funds and facilities among programs. (p. 9)

In discussing the need for articulation between different levels of educational observation within nursing, Ellis (1976) observed that although articulation between bachelor's and master's programs in nursing could be improved, it was not seriously handicapping. However, the diversity of orientation, content, focus and goals of master's programs in nursing presented complete lack of articulation, or at best, serious problems of articulation, with doctoral programs both in and ouside the field of nursing. Ellis (1976) stated:

> At issue throughout nursing education is how to design programs that will produce the desired experiences for the development of every student to the minimum competence desired as the outcome of that level of program. This is, of course, a problem in any professional program anywhere. Within nursing, however, it is an acute problem because each level of program is a terminal one for the majority of graduates, yet it must also prepare some graduates to proceed expeditiously to the next formal level of education. (p. 32)

Length of Program

According to Stinson (1977), the one-year master's program in nursing, with only moderate emphasis on nursing research, is not uncommon in the United States. In Canada, the predominant model is the two-year academic program, with considerable emphasis upon nursing research. Grossman (1972) summarized the effect that varying philosophies and purposes ascribed to master's level education in nursing can have, by noting that nursing competence in a clinical specialty is all that can be achieved in a one year master's program, and that preparation for teaching and administration would necessarily follow in a second year of a master's program, or at a post-master's or doctoral level.

SUMMARY

In this chapter an attempt was made first, to explore the topic of purposes and characteristics of master's level education in nursing; secondly, to review trends in general master's level education and nursing master's level education; and thirdly, to discuss issues and problems specific to master's level education in nursing.

There presently exists in Canada no position paper or specific statement at the national level, relating to purposes and characteristics of graduate education in nursing. The statements relating specifically to purposes and characteristics of graduate education in nursing most frequently cited in Canada, as well as the United States, are those of the American Nurses' Association and the

National League for Nursing. The American Nurses' Association (1969) stated that preparation of nurse clinicians capable of improving nursing care through advancement of nursing theory and science should be the major purpose of graduate study in nursing, while the National League for Nursing (1978) provided a wider interpretation by stating that the purpose of master's education is the preparation of professional nursing leaders, particularly clinical specialists, teachers, supervisors and administrators. At the provincial level, The Report of the Alberta Task Force on Nursing Education, September 1975, made no attempt to specify the exact nature of the content of nursing programs leading to master's and doctoral degrees. The Alberta Association of Registered Nurses is currently developing a position paper on graduate education for Alberta nurses.

Graduate education in nursing embodied the characteristics of graduate education in general, as well as specific characteristics of professional education, and has been affected by increased enrollments, professionalization of the master's degree and innovations in programs and policies. Within graduate education in nursing, a shift in focus from functional preparation for teaching and administration to clinical specialization as the primary advanced area of interest, has occurred. This trend may have developed more slowly and less pervasively in Canada than in the United States. A close relationship, however, has existed historically between Canadian and American nursing; similar patterns of nursing education have evolved on both sides of the border. Another prominent trend affecting master's level education in nursing has been the reversal

in nursing education of the usual pattern of content flow, so that a progressive flow of content or subject matter from lower to higher educational divisions, has occurred.

Increasing specialization, development of professional or academic master's in nursing programs, the necessity for experience in nursing practice as a prerequisite for admission to a master's program in nursing, accreditation, humanism in master's level education in nursing, diversity of master's programs in nursing and program length, are all issues and/or problems affecting graduate level education in nursing. In the past, considerable debate concerning these issues and problems has occurred, and it appears that the debate continues in the present.

CHAPTER THREE

INSTRUMENTATION AND METHODOLOGY

This chapter describes the instrument used in the study and the methods employed to collect and analyse data. A survey approach was utilized in this study.

INSTRUMENTATION

The Questionnaire

Data were collected using a questionnaire survey. A copy of the questionnaire is included in Appendix B. The questionnaire is composed of five sections relating to: (1) personal and professional characteristics of the respondents; (2) perceptions of importance of possible goals of a special purpose master's in nursing program for Alberta nurse educators; (3) perceptions of importance of possible characteristics of a special purpose master's in nursing program for Alberta nurse educators; (4) expressed interest in pursuing a special purpose master's in nursing program for Alberta nurse educators; and (5) comments concerning a special purpose master's in nursing program for Alberta nurse educators.

Personal and professional data collected in Part A of the questionnaire, related to the Alberta nurse educators' personal characteristics, nature of their educational preparation and time and geographic location of their educational preparation.

Sixteen statements relating to possible goals of a special

purpose master's in nursing program for Alberta nurse educators, located in Part B of the questionnaire, were evolved from position statements of professional nursing associations in Canada and the United States, and from beliefs of nursing leaders expressed in the current nursing literature. Respondents were asked to indicate their perceptions of the importance for a special purpose master's in nursing program for Alberta nurse educators of each of the sixteen goals using the following rating scale:

1. Not important
2. Slightly important
3. Moderately important
4. Highly important
5. Very highly important

Forty statements relating to possible characteristics of a special purpose master's in nursing program for Alberta nurse educators, located in Part C of the questionnaire, were evolved from position statements of professional nursing organizations in Canada and the United States, from statements of involved government and education agencies, and from an analysis of the trends, issues and problems associated with master's in nursing programs, as reflected in the current nursing literature. A systems model conceptualization was utilized to identify the dimensions of the characteristics, as is shown in Figure 1.

A table of random numbers was utilized to determine the order of the 16 possible goals contained in Part B and of the 40 possible characteristics contained in Part C of the questionnaire. This was done to reduce the likelihood of bias resulting from the investigator's sequencing of the statements of goals and characteristics.

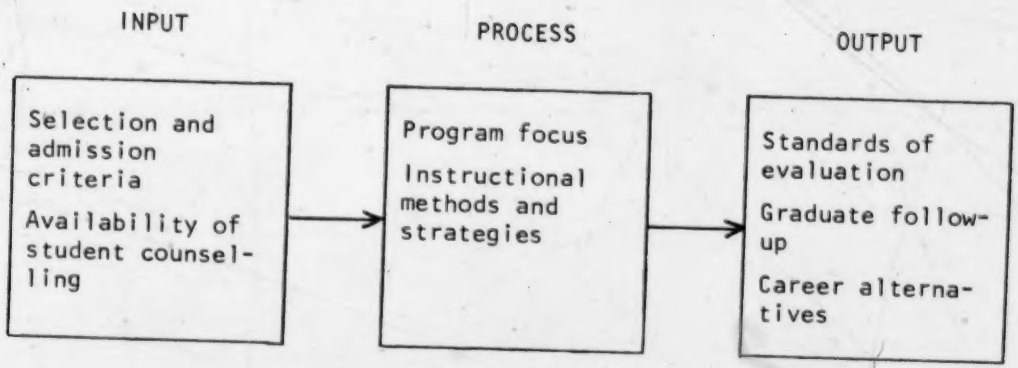

Figure 1

Dimensions of Possible Characteristics of a Special Purpose Master's in Nursing Program for Alberta Nurse Educators

Part D of the questionnaire asked respondents for an expression of interest or no interest in a special purpose master's in nursing program for Alberta nurse educators. Respondents expressing no interest were requested to select from a list of 14 reasons, no more than three reasons for their lack of interest. Respondents expressing interest in such a program were requested to identify from a list of 27, facilitators to their participation, and from a list of 11, barriers to their participation.

Part E of the questionnaire encouraged respondents to comment on any aspect of a special purpose master's in nursing program for Alberta nurse educators.

The Pilot Study

In an attempt to establish content and format validity of the questionnaire instrument, pilot testing was carried out. Names and addresses of nurse educators registered with the Alberta Association of Registered Nurses and resident in another province in Canada, were selected from a computerized membership list supplied by the Association. Additional pilot test respondents known to the investigator and who were currently employed as nurse educators in another province in Canada, or who had been employed as nurse educators within the past three years, were selected. A total of 27 pilot test respondents were mailed a draft of the questionnaire with the request that the questionnaire be completed and then critiqued in relation to content and format. A total of 25 nurse educator respondents, or 93%, returned completed questionnaires. Each comment provided by pilot study respondents was transcribed and

categorized according to the section of the questionnaire to which it referred. Within each questionnaire section, response items were rewritten to incorporate respondent recommendation. No major revisions of the pilot study questionnaire were carried out.

METHODOLOGY

Data Collection

The questionnaire was distributed to 306 nurse educators involved in Alberta nursing assistant, diploma, baccalaureate and master's degree programs, and to 31 nurse educators employed in Alberta health care agency inservice programs.

Permission and assistance in distributing questionnaires were sought from directors of all nursing education programs in Alberta which prepared nursing assistant, diploma, baccalaureate and master's level practitioners. Initial contact with the directors was by letter, with follow-up phone calls to explain further the nature of the study and to answer any questions that the directors had. All 16 nursing education program directors agreed to participate in the study. Copies of the questionnaire, sufficient for the number of full and part-time instructors and educational administrators employed in their programs, were mailed or delivered to all directors, who then distributed them to the nurse educators employed by their program.

Names of contact persons associated with nursing inservice interest groups in Calgary and Edmonton were obtained from the coordinators of Continuing Nursing Education programs at the

University of Calgary and the University of Alberta. The Calgary and Edmonton inservice educator interest groups were subsequently contacted to obtain a sample of nurse educators employed in Alberta health care agency inservice programs.

In Edmonton, the nature of the study was explained at the interest group's March, 1979 meeting, and a list was obtained from this interest group of all known Edmonton-area inservice nurse educators. Questionnaires were either mailed or delivered to these identified Alberta nurse educators.

In Calgary, a written explanation of the study and request for participation of inservice nurse educators was examined by the inservice nurses' interest group, at their April, 1979 meeting. The Calgary nurses' inservice interest group agreed to participate in the study by asking their members to send their names and addresses directly to the investigator. Two questionnaires were subsequently mailed to interested Calgary inservice nurse educators who requested participation in the study.

A total of 337 questionnaires were distributed to Alberta nurse educators. Geographically, 208 questionnaires were distributed in Edmonton, 86 in Calgary and 43 elsewhere in Alberta. Of the total number of questionnaires distributed by program directors, 44 were received by Alberta nurse educators involved in nursing assistant programs, 208 were received by Alberta nurse educators involved in nursing diploma programs, 54 were received by Alberta nurse educators involved in baccalaureate and master's degree programs and 31 were received by nurse educators employed in selected Alberta health care

agencies. Each questionnaire was accompanied by a letter of introduction and explanation, a stamped, self-addressed envelope in which to return the completed questiolnnaire and a stamped, self-addressed, separate Request for Study Summary postcard for those respondents wishing a written summary of the study findings. A follow-up letter was distributed to all study participants approximately one month after initial distribution of the questionnaire in order to encourage any remaining study participants who wished to do so to complete and return the questionnaire. Copies of all correspondence are located in Appendix C.

Two hundred and thirty-five questionnaires were returned. Of these, one was not usable, resulting in a usable response rate of 69%. The proportionate response rate was 41% for nurse educators involved in Alberta nursing assistant programs, 70% for nurse educators involved in Alberta diploma programs, 92% for nurse educators involved in baccalaureate and master's degree programs and 74% for nurse educators employed in selected Alberta health care agencies. To the extent that the response rate varied among the respondent groups, the generalizability of the study findings to the population of Alberta nurse educators should be viewed with caution.

Data Analysis

Frequency and percentage distributions were used to describe the personal and professional characteristics of the Alberta nurse educators and to assess their interest in participating in a special purpose master's in nursing program for Alberta nurse educators. Reasons for lack of interest in such a program were summarized and

analyzed by rank ordering the frequency of responses.

Rank ordering of response frequencies was also used to identify some common facilitators and barriers to Alberta nurse educators' participation in a special purpose master's in nursing program.

Response means, standard deviations and mean ranks were used to identify and describe program goals and characteristics assessed by Alberta nurse educators as important to a special purpose master's in nursing program for Alberta nurse educators.

T and F tests were used to determine statistically significant mean differences among Alberta nurse educators, grouped according to personal and professional characteristics, in their perceptions of the importance of goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators. The Scheffé test was used as an a posteriori contrast for statistically significant F tests to determine between which of the Alberta nurse educators, grouped according to personal and professional characteristics, the statistically significant mean differences in perceptions of importance of goals and characteristics existed.

SUMMARY

The data for this study were collected by the use of a questionnaire. Questions concerning personal and professional background of the respondents, expressed interest in undertaking a special purpose master's in nursing program for Alberta nurse educators, potential facilitators and barriers to participation and perceptions of

important goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators were included. All Alberta nurse educators teaching in nursing assistant, diploma, baccalaureate and master's degree programs, and a sample of nurse educators employed in Alberta health care agency inservice programs, were included in the study.

CHAPTER FOUR

ANALYSIS OF THE DATA AND DISCUSSION OF THE FINDINGS

Description and discussion of the findings resulting from data analysis are presented in this chapter with a major section devoted to each of the study subproblems. Personal and professional characteristics of the respondents are presented in the initial section. Subsequent sections discuss expressed interest in a special purpose master's in nursing program for Alberta nurse educators, respondents' perceptions of facilitators and barriers to participation in such a program, respondents' perceptions of important goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators and statistically significant mean differences in respondents' perceptions of importance of possible goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators. The final section presents a summary of the chapter.

RESPONDENTS' PERSONAL AND PROFESSIONAL CHARACTERISTICS

Personal Characteristics

Alberta nurse educators were requested to provide information concerning their age, sex, years of teaching experience in nursing, years of non-teaching nursing work experience, nature of employing program, administrative position, types of employment, percentage of

workload directly related to teaching function, instructional setting and geographic location of employment in describing their personal characteristics. Using frequency and percentage distributions, responses were summarized and appear in Table 1.

One-half of the respondents were between 25 and 34 years of age, although almost one-third reported that they were between 35 and 44 years of age. An overwhelming majority (97%) of the respondents were female. The largest proportion of respondents, almost one-third, reported that they had been teaching in nursing for one to four years, although an only slightly smaller proportion reported from five to eight years of experience in teaching nursing. Slightly more than half of the respondents reported one to four years of non-teaching nursing work experience.

The largest proportion of respondents were employed in hospital nursing education programs (44.1%), while the next largest proportion were employed in college diploma nursing education programs (16.6%) and baccalaureate programs (17.0%). Inservice nurse educators accounted for slightly less than 10% of the total number of respondents.

Of the 47 nurse educators who were employed in administrative positions, two-thirds described their position as being at the co-ordinator level. Three-quarters of the Alberta nurse educators reported that they were employed in full-time, permanent positions.

Slightly more than one-half of the respondents reported that 76% to 100% of their workload was directly related to their teaching function, while slightly more than one-quarter reported that 51% to

Table 1

Frequency and Percentage Distribution of Personal Characteristics of Alberta Nurse Educators

Characteristics		Categories						
Age in years		<25	25-34	35-44	45-54	55-64		
	f	2	116	76	30	8		
	%	0.9	50.0	32.8	12.9	3.4		
Sex		Female			Male			
	f	227			7			
	%	97.0			3.0			
Years of teaching experience in nursing		<1	1-4	5-8	9-12	13-16	17-20	21>
	f	27	73	60	40	14	10	7
	%	11.7	31.6	26.0	17.3	6.1	4.3	3.0
Years of non-teaching nursing work experience		<1	1-4	5-8	9-12	13-16	17-20	21>
	f	19	122	42	29	8	4	4
	%	8.3	53.5	18.4	12.7	3.5	1.8	1.8

Table 1 (continued)

Characteristics		Categories						
Nature of employing program		Nursing inservice	Nursing assistant	Hospital diploma	College diploma	Baccalaureate degree	Master's degree	Other
	f	22	18	101	38	39	3	8
	%	9.6	7.9	44.1	16.6	17.0	1.3	3.5
Administrative position		Co-ordinator		Dept. head/ chairman	Asst. dir./ dean	Assoc. dir./ dean		Dir./ dean
	f	31		6	5	1		4
	%	66.0		12.8	10.6	2.1		8.5
Type of employment		Part-time, temporary		Part-time, permanent	Full-time, temporary	Full-time, permanent		
	f	11		14	29	175		
	%	4.8		6.1	12.7	76.4		
Percentage of workload directly related to teaching function		25%		26-50%	51-75%	76-100%		
	f	16		26	61	124		
	%	7.0		11.5	26.9	54.6		

Table 1 (continued)

Characteristics		Categories				
Instructional settings		Clinical, mainly	Classroom, mainly	Clinical & classroom, equally	Nursing laboratory	Other
	f	72	44	104	3	4
	%	31.7	19.4	45.8	1.3	1.8
Geographic location of employment		Calgary	Edmonton	Lethbridge	Medicine Hat	Red Deer	Other
	f	51	153	13	4	7	1
	%	22.3	66.8	5.7	1.7	3.1	0.4

75% of their workload was directly related to their teaching function. The largest proportion--45.8%--of the respondents taught equally in clinical and classroom settings, although almost one-third reported that they taught mainly in the clinical setting.

Two-thirds of the respondents were employed in Edmonton, with slightly fewer than one-quarter of the respondents employed in Calgary, and the remaining approximately 10% employed elsewhere in Alberta. These proportions compare favourably with the initial distribution of study questionnaires.

Educational Preparation

To determine the nature of the educational preparation of Alberta nurse educators, respondents were asked to provide information relating to their highest level of nursing and non-nursing education, nature of initial nursing preparation, focus of baccalaureate in nursing degree, if applicable, and focus of master's degree in nursing, if applicable. Responses were summarized using frequency and percentage distributions and are presented in Table 2.

Almost three-quarters of the respondents possessed a baccalaureate in nursing degree as their highest level of completed nursing education. Only about 15% reported that they had completed a master's degree in nursing. The greatest proportion of respondents--approximately 80%--reported high school as their highest level of non-nursing education.

Three-quarters of all respondents reported a hospital diploma program as their initial nursing preparation. Almost one-quarter of the respondents, however, reported that their initial nursing

Table 2

Frequency and Percentage Distribution of Educational Preparation of Alberta Nurse Educators

Educational Preparation		Categories			
Highest level of nursing education		Diploma	Baccalaureate	Master's	Doctorate
	f	30	169	34	1
	%	12.8	72.2	14.5	0.4
Highest level of non-nursing education		High school	College/technical diploma	Baccalaureate degree	Master's degree	Doctoral degree
	f	182	3	15	18	5
	%	81.6	1.3	6.7	8.1	2.2
Nature of initial nursing preparation		Hospital diploma	College diploma	Baccalaureate degree		
	f	177	3	54		
	%	75.6	1.3	23.1		

Table 2 (continued)

Educational Preparation		Categories			
Focus of baccalaureate in nursing preparation		Generalized	Teaching & supervision	Community/ public health	Supervision/ administration
	f	72	71	35	3
	%	36.0	35.5	17.5	1.5
		Teaching	Clinical specialization	Other	
	f	7	1	11	
	%	3.5	0.5	5.5	
Focus of master's in nursing preparation		Generalized	Teaching	Administration nursing practice	
	f	1	2	3	
	%	3.1	6.3	9.4	
		Administration nursing education	Clinical specialization	Other	
	f	2	9	15	
	%	6.3	28.1	46.9	

preparation had been in a baccalaureate degree program.

An almost equal proportion of respondents with baccalaureates in nursing reported a generalized program focus and a specialized program focus emphasizing teaching and supervision. Together, these two program types accounted for slightly less than three-quarters of the respondents.

Of the 32 nurse educators reporting master's degrees in nursing, slightly fewer than one-half reported the focus of their program as "other." Further examination of remarks concerning the "other" category showed that one third were prepared for the functional role of teaching with a clinical specialization in nursing. Slightly more than one-quarter of the respondents indicated that clinical specialization represented the focus of their master's level nursing preparation.

Time and Geographic Location of Educational Preparation

To determine when and where educational preparation had been obtained, Alberta nurse educators were asked to indicate the year in which their highest level of nursing and non-nursing education had been completed and the names of provinces and countries in which their nursing preparation had been taken. Responses were summarized using frequency and percentage distributions and are presented in Table 3.

An almost equal proportion of 30% each of the Alberta nurse educators reported that they had completed their highest level of nursing education between 1968 and 1971, and between 1972 and 1975. The next largest proportion, slightly less than 20%, completed their highest level of nursing education in 1976 or later. The greatest

Table 3

Frequency and Percentage Distribution of Time and Geographic Location of Educational Preparation of Alberta Nurse Educators

Time and Place		Categories					
Year in which highest level of nursing education completed		<1960	1960-63	1964-67	1968-71	1972-75	1976>
	f	15	9	28	69	68	44
	%	6.4	3.9	12.0	29.6	29.2	18.9
Year in which highest level of non-nursing education completed		<1960	1960-63	1964-67	1968-71	1972-75	1976 >
	f	65	38	45	45	10	21
	%	29.0	17.0	20.1	20.1	4.5	9.4
Geographic location of nursing education		Alta.	B.C.	Man.	N.S.	Ont.	P.Q.	Sask.	U.S.A.	Other
	f	160	15	12	4	31	31	32	37	13
	%	68.4	6.4	5.1	1.7	13.2	13.2	13.7	15.8	5.6
Geographic location of master's in nursing education		McGill University				U.B.C.			University in U.S.A.	
	f	5				1			26	
	%	15.6				3.1			81.3	

proportion (29.0%) of respondents completed their highest level of non-nursing education prior to 1960.

Slightly more than two-thirds of the Alberta nurse educators received at least some of their nursing education in Alberta. Sixteen percent reported that some of their nursing education had been taken in the United States. An almost equal proportion of 13% reported that they had taken some of their nursing education in Ontario, Quebec and Saskatchewan. The 5.6% of respondents reporting "other" for geographic location of nursing preparation were comprised almost totally of Alberta nurse educators who had received some nursing education in the United Kingdom.

Of the 32 nurse educators who reported that they possessed master's degrees in nursing, slightly more than 80% had received their degrees in the United States. The others had obtained their master's degree in nursing from McGill University and from the University of British Columbia.

ALBERTA NURSE EDUCATORS' EXPRESSED INTEREST IN A SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM

Respondents were requested to indicate their interest in undertaking a special purpose master's in nursing program for Alberta nurse educators. Responses were summarized using frequency and percentage distributions and are presented in Table 4.

From Table 4 it can be seen that slightly more than half of the respondents expressed interest in undertaking a special purpose master's in nursing program for Alberta nurse educators. Although not all those who expressed interest could be expected to pursue such

Table 4

Alberta Nurse Educators' Expressed Interest in Pursuing a Special Purpose Master's in Nursing Program

Response Category	Frequency	Percentage
Yes	135	57.7
No	99	42.3
Total	234	100.0

a program if it were offered, it is evident that a decided interest in a special purpose master's in nursing program does exist among Alberta nurse educators.

Respondents who expressed no interest in pursuing a special purpose master's in nursing program were requested to select from among 14 responses, no more than three reasons for their lack of interest. Additionally, respondents who selected the category of "other" as one of their reasons, were requested to specify what was the "other" reason. Reasons for lack of interest in pursuing a special purpose master's in nursing program were summarized using a frequency distribution and were rank ordered according to frequency of response. Table 5 shows the results.

Possession by the Alberta nurse educator of a master's degree was the most commonly cited reason for lack of interest in pursuing a special purpose master's in nursing program and this reason was far more frequently mentioned than the second tied ranked reasons of family responsibilities and "other." Another 11 Alberta nurse educators cited current enrollment in a master's program as a reason for lack of interest, a response which ranked fourth overall. Slightly more than 40% of the Alberta nurse educators who expressed no interest in pursuing a special purpose master's in nursing program did so because they either already had a master's degree or were in the process of obtaining one.

Taken together, the two most commonly stated reasons in the "other" category for lack of interest in pursuing a special purpose master's in nursing program, seemed to indicate a dissatisfaction

Table 5

Alberta Nurse Educators' Expressed Reasons for Lack of Interest in a Special Purpose Master's in Nursing Program by Rank Order of Frequency of Response

Reason	Frequency	Rank
Already have a master's degree	50	1
Family responsibilities	14	2.5
Other	14	2.5
Currently enrolled in a master's program	11	4
Lack prerequisite baccalaureate degree	9	6
Too near retirement	9	6
Master's level education not a priority	9	6
Lack of financial assistance	7	8
Thesis requirement of program	6	9
Loss of employment seniority	4	10.5
Too long a period since previous study	4	10.5
Academic demands too difficult	2	13
Lack of time	2	13
Loss of present position	2	13

with the nursing profession and with nursing education as these currently exist. Of the 135 Alberta nurse educators who expressed lack of interest in pursuing a special purpose master's in nursing program, almost 7% did so because of dissatisfaction with nursing and/or nursing education.

FACILITATORS AND BARRIERS TO PARTICIPATION IN A SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM

Inducements to Participation

Twenty-seven potential inducements to participation in a special purpose master's in nursing program were grouped according to the categories of place, time of study, setting, intensity, term of full-time study, financial support, leave arrangements and rewards. Alberta nurse educators who had expressed interest in undertaking a special purpose master's in nursing program for Alberta nurse educators, were asked to indicate only those of the provisions which would be significant inducements to their participation. Responses were summarized by frequency distribution and were rank ordered according to frequency of response. This information appears in Table 6.

The most commonly identified inducement to participation was university campus as setting. Two provisions tied for second and third ranked inducements to Alberta nurse educator participation. One, related to financial support, was basic government grants and loans, while the other, related to place, was Edmonton. By frequency of response, both of these inducements scored well behind the first ranked inducement of university campus as setting. The fact that

Table 6

Alberta Nurse Educators' Expressed Inducements to Participation in a Special Purpose Master's in Nursing Program by Rank Order of Response Frequencies

Inducement	Category	Frequency	Rank
University campus	Setting	113	1
Basic government grants and loans	Financial support	89	2.5
Edmonton	Place	89	2.5
Mixed full and part-time study	Intensity	88	4
Evening classes	Time of study	85	5
Permission to attend classes while still on job	Leave arrangements	83	6
Salary increment	Rewards	80	7.5
Professional recognition	Rewards	80	7.5
Promotion to more responsible position	Rewards	75	9
Day-time classes	Time of study	73	10
Summer session classes	Time of study	67	11
Leave with partial pay	Leave arrangements	58	12
Special financial award	Financial support	51	13
5-8 months	Term of full-time study	47	14
Calgary	Place	43	15
9-12 months	Term of full-time study	38	16
Nearby off-campus locations	Setting	34	17
Weekend classes	Time of study	31	18
All part-time study	Intensity	29	19
Leave with full pay	Leave arrangements	27	20.5
Leave without pay	Leave arrangements	27	20.5
All full-time study	Intensity	21	22
1-4 months	Term of full-time study	18	23
Elsewhere	Place	12	24
Lethbridge	Place	10	25
0 months	Term of full-time study	9	26
13 or more months	Term of full-time study	8	27

two-thirds of all respondents were employed in Edmonton may have influenced the respondents' selection not only of the first ranked inducement but also of the second and third ranked inducements of Edmonton, since the university campus of the University of Alberta would be readily accessible to them.

Mixed full and part-time study was the fourth ranked inducement to participation in a special purpose master's in nursing program. By frequency of response, the fifth ranked inducement of evening classes, the sixth ranked inducement of permission to attend classes while still on the job and the tied seventh and eighth ranked inducements of salary increments and professional recognition were all very close and not far removed from the second, third and fourth ranked inducements.

Clustered among the ten most preferred inducements were provisions related to rewards. These were salary increment and professional recognition, which were tied for seventh and eighth rank overall, and promotion to a more responsible position, which ranked ninth. The only other inducements to cluster by category of provision, were day-time classes, which ranked tenth, and summer session classes, which ranked eleventh. Both of these inducements related to time of study.

The five least preferred inducements were: thirteen or more months as the term of full-time study; 0 months as the term of full-time study; Lethbridge as place of study; elsewhere as place of study; and one to four months as the term of full-time study.

Barriers to Participation

Respondents who had expressed interest in the possibility, sometime in the future, of undertaking a special purpose master's in nursing program, were requested to indicate which, if any, of ten potential barriers to participation, would affect them. The nurse educators were asked to limit their responses to no more than three potential barriers and were provided with one response categorized as "other" by which they might identify barriers not specifically listed. Table 7 presents responses summarized by frequency distribution and rank ordered according to frequency of response.

Alberta nurse educators identified lack of financial assistance as the single most likely barrier to their participation in a special purpose master's in nursing program, with family responsibilities ranked a close second. The third and fourth most likely barriers to participation of personal time restraints and thesis requirement of the program, respectively, had an almost equal number of responses and were well separated from both the second ranked potential barrier of family responsibilities and the fifth ranked potential barrier of loss of present position. Loss of present position, academic expectations of master's level program and distance to university offering the program, ranked fifth, sixth and seventh, respectively, and differed among themselves very little in frequency of response.

Of the three potential barriers to participation which related to academic concerns, the Alberta nurse educators expressed twice as many concerns about the thesis requirement of the program as they did about the academic expectations of a master's level

Table 7

Alberta Nurse Educators' Perceptions of Potential Barriers to Participation in a Special Purpose Master's in Nursing Program by Rank Order of Response Frequencies

Potential Barriers	Frequency	Rank
Lack of financial assistance	64	1
Family responsibilities	55	2
Personal time restraints	42	3
Thesis requirement of program	41	4
Loss of present position	21	5
Academic expectations of master's level program	19	6
Distance to university offering program	18	7
Loss of employment seniority	13	8
Long period of time since previous study	12	9
None of the following	10	10
Other	5	11

program. Additionally, three times as many concerns about the thesis requirement were expressed in comparison to concerns expressed about the length of time since previous study. Thesis requirement of the program also ranked fourth overall as a potential barrier to participation, indicating a high degree of concern among Alberta nurse educators interested in the possibility, sometime in the future, of undertaking a special purpose master's in nursing program, about this potential barrier.

Ten of the 135 Alberta nurse educators who expressed interest in the possibility, sometime in the future, of undertaking a special purpose master's in nursing program, indicated that none of the listed potential barriers affected them. These ten respondents represent approximately 8% of the Alberta nurse educators who expressed interest in possibly participating in a special purpose master's in nursing program.

The potential barriers to participation identified under the "other" category, were specified by the respondents as being: lack of employer recognition (no monetary increases, no chance for promotion); respondent not yet highly enough motivated; lack of suitable program; preference for an established and well recognized program and lack of program in which interested.

The four least frequently identified potential barriers to participation were: barriers described as "other"; none of the following; long period of time since previous study; and loss of employment seniority.

PROGRAM GOALS

Alberta nurse educators were asked to indicate their perceptions of the importance of 16 goal statements of a special purpose master's in nursing program for Alberta nurse educators, in terms of their personal beliefs, and using a five-point Likert-type rating scale. Responses were summarized by computing means and standard deviations for each program goal. Rank ordering of response means was used to analyse the responses and this analysis is presented in Table 8.

Thirteen of the 16 goal statements were perceived by the Alberta nurse educators as being of high importance and three were perceived as being moderately important. None of the 16 goal statements was perceived as being only slightly or not important.

The single most important goal of a special purpose master's in nursing program for Alberta nurse educators identified by the Alberta nurse educators was the preparation of nurse educators to improve the quality of nursing education. Ranked a close second was the goal of preparation of nursing education leaders, while improvement of nursing practice ranked a close third. The mean scores of the 10 most highly ranked goals were not widely dispersed and each goal's standard deviation was less than 1.0, suggesting high congruence concerning the importance of these program goals.

Providing a foundation for doctoral study, increasing monetary rewards and increasing personal, professional prestige were the three least important program goals as perceived by the Alberta nurse educators. These three goals had very similar mean

Table 8

Perceptions of Importance of Goals of a Special Purpose Master's in Nursing Program by Rank Order of Response Means

Program Goal	Mean	S.D.	Rank
Improve quality of nursing education	4.47	0.74	1
Prepare nursing education leaders	4.38	0.74	2
Improve nursing practice	4.31	0.79	3
Enhance nurse educators' teaching	4.22	0.83	4
Advance nursing as a profession	4.17	0.91	5
Expand the body of nursing knowledge	4.13	0.88	6
Improve organization and delivery of nursing education programs	4.06	0.83	7
Satisfy desire for intellectual stimulation and growth	4.01	0.93	8
Promote individual's professional growth	3.99	0.92	9
Improve quality of nursing inservice	3.94	0.84	10
Prepare expert nurse clinicians	3.92	1.05	11
Prepare for expanded clinical roles	3.58	1.06	12
Enhance opportunities for advancement	3.51	0.94	13
Increase personal, professional prestige	3.06	1.14	14
Increase monetary rewards	3.04	0.95	15
Provide foundation for doctoral study	2.94	1.00	16

scores and their mean scores were relatively distant from the 13 other goals, indicating that the Alberta nurse educators perceived them as being of similar lesser importance compared to the other 13 goals. Providing a foundation for doctoral study was perceived by the Alberta nurse educators as being the single least important possible goal of a special purpose master's in nursing program for Alberta nurse educators.

In contrast to goals whose primary impact would be on nursing education or on the broad spectrum of the profession of nursing, three of the five least important program goals, as ranked by the Alberta nurse educators, were related to what might be described as individual or personal aspirations. They were: enhancing opportunities for advancement; increasing personal, professional prestige; and increasing monetary rewards. Two of the five program goals relating to personal aspirations were perceived by the Alberta nurse educators as being more important than these three. Satisfaction of one's desire for intellectual stimulation and growth and promotion of the individual's professional growth were ranked eighth and ninth, respectively, in importance. As a group, Alberta nurse educators tended to rank altruistic program goals highest in importance for a special purpose master's in nursing program, and personal career concerns least in importance.

PROGRAM CHARACTERISTICS

Alberta nurse educators were asked to indicate their perceptions of the importance of 40 characteristics of a special purpose master's in nursing program for Alberta nurse educators, in terms of their personal beliefs, and using a five-point Likert-type rating scale. Responses were summarized by computing means and standard deviations for each possible program characteristic. Rank ordering of response means was used to analyse the responses and this analysis is presented in Table 9.

Twenty-four of the 40 program characteristics were perceived by the Alberta nurse educators as being highly important; 15 were perceived as moderately important; and only one was perceived as only slightly important.

The two most important program characteristics identified by the Alberta nurse educators were stressing program individualization and providing for credit transferability. Nurse educators also perceived the importance of requiring nursing practice experience for admission and ranked it third in overall importance as a program characteristic.

Of the three program characteristics which related specifically to the focus of the program, Alberta nurse educators placed equal emphasis on clinical specialization and teaching, eleventh overall, and ahead of the program characteristics of primary emphasis on teaching, and primary emphasis on clinical specialization. These program characteristics ranked 28th and 33rd, respectively.

With regard to the research component of the program, Alberta

Table 9

Perceptions of Importance of Characteristics of a Special Purpose Master's in Nursing Program by Rank Order of Response Means

Program Characteristics	Mean	S.D.	Rank
Stresses program individualization	4.36	0.80	1
Provides for credit transferability	4.30	0.79	2
Requires nursing practice experience for admission	4.19	0.96	3
Promotes study of health care issues	4.15	0.86	4
Stresses follow-up of graduates	4.12	0.84	5
Stresses change theory courses	4.07	0.85	6
Encourages independent study	4.05	0.91	7.5
Promotes accessibility of students to faculty	4.05	0.89	7.5
Stresses study of nursing issues	4.02	0.91	9
Stresses curriculum development study	3.96	0.89	10
Equal emphasis on clinical specialization and teaching	3.93	1.00	11
Emphasizes study of teaching/learning	3.91	0.87	12
Provides micro-teaching experience	3.73	0.99	13
Prepares informed research consumer	3.70	1.05	14
Stresses behavioral objectives	3.67	0.99	15
Provides nontraditional clinical specialization	3.65	1.12	16
Permits advanced student placement	3.64	0.97	17
Stresses interdisciplinary classes	3.62	1.01	18.5
Emphasizes learning about student teacher relationships	3.62	0.90	18.5
Stresses course and program counselling	3.60	1.01	20

Table 9 (continued)

Program Characteristics	Mean	S.D.	Rank
Emphasizes learning about today's nursing student	3.57	0.97	22
Provides work experience credit	3.57	0.97	22
Distinguished by concentrated study in nursing	3.57	1.09	22
Stresses academic counselling	3.52	0.98	24
Emphasizes humanities	3.48	0.85	25
Promotes study of post-secondary system	3.46	0.96	26
Prepares beginning researcher	3.45	1.03	27
Primary emphasis on teaching	3.40	1.07	28
Emphasizes social sciences	3.34	0.87	29
Stresses use of instructional modules	3.31	1.03	30
Requires completion of research study	3.28	1.31	31
Integrates traditional clinical areas	3.17	1.05	32
Primary emphasis on clinical specialization	3.04	1.07	33
Emphasizes physical sciences	2.96	0.91	34
Emphasizes learning about disadvantaged nursing student	2.89	1.09	35
Requires nursing education research	2.87	1.16	36
Requires clinical nursing research	2.87	1.25	37
Promotes pass/fail grading	2.80	1.25	38
Stresses student counselling for personal problems	2.67	1.10	39
Permits admission of non-nursing baccalaureates	2.06	1.17	40

nurse educators ranked preparation of an informed consumer of research 14th overall as a program characteristic, and ahead of preparation of a beginning researcher, which was ranked 23rd overall. The program characteristic of requiring completion of a research study was ranked 31st. The respondents' preference for the research focus of the program was not clearly delineated by them, since they ranked the characteristic of requiring nursing education research 36th and the program characteristic of requiring clinical nursing research 37th, overall. (A program characteristic of focusing either on nursing education or clinical nursing research was not offered to the Alberta nurse educators. Neither was a program characteristic of focusing on nursing education and clinical nursing research offered. It is possible that one of these two options might have been more appealing to the Alberta nurse educators.)

Alberta nurse educators ranked the characteristic of a program distinguished by concentrated study in nursing 22nd, overall, or about mid-way in importance in the list of 40 program characteristics. In light of the fact that the Alberta nurse educators were being asked about their perceptions of importance of characteristics for a master's in nursing program, this was a surprising response. Possibly, this characteristic was assumed by the Alberta nurse educators as being a given, an undeniable characteristic that did not stir their interest as much as more controversial characteristics. Evidently, the Alberta nurse educators did not perceive a program distinguished by concentrated study in nursing as being as important as at least half of the other program characteristics.

The five least important program characteristics as perceived by the Alberta nurse educators were: permits admission of non-nursing baccalaureates; stresses student counselling for personal problems; promotes pass/fail grading; requires clinical nursing research; and requires nursing education research.

MEAN DIFFERENCES IN PERCEPTIONS OF IMPORTANCE OF PROGRAM GOALS

Using t and F tests, mean differences in Alberta nurse educators' perceptions of importance of 16 program goals of a special purpose master's in nursing program for Alberta nurse educators were examined by personal and professional characteristics of respondents. The respondent personal and professional characteristics used to examine differences in means were those appearing in Tables 1, 2 and 3 of this chapter, with the exceptions of sex, focus of master's in nursing preparation and geographic location of master's in nursing education. The independent variable of sex could not be meaningfully examined because of large discrepancies in respective numbers. The independent variables of focus of master's in nursing preparation and geographic location of master's in nursing education lacked sufficient numbers for meaningful examination. This section identifies and discusses the statistically significant mean differences. Scheffé tests for statistically significant mean differences demonstrated by F tests are contained in Appendix D.

Personal Characteristics

Age. One statistically significant mean difference in perceptions of importance of program goals according to age was demonstrated. Table 10 shows this statistically significant mean difference. The Scheffé test ($p \leq .1$) showed that the statistically significant mean difference existed between respondents under 35 years of age, who ascribed greater importance to the program goal of advancing nursing as a profession, and the respondents aged 35 to 44 years.

Years of teaching experience in nursing. One statistically significant mean difference in perceptions of the importance of program goals according to respondents' years of teaching experience in nursing was demonstrated, as shown in Table 11. The Scheffé test indicated that respondents with one to four years of teaching experience in nursing ascribed less importance to satisfying desire for intellectual stimulation and growth as a program goal than did either respondents with less than one year of teaching experience in nursing or those with from five to eight years teaching experience in nursing.

Years of non-teaching nursing work experience. One statistically significant mean difference in perceptions of importance of program goals by years of non-teaching nursing work experience was demonstrated. Table 12 shows this statistically significant mean difference. The Scheffé test showed that respondents with from nine to twelve years of non-teaching nursing work experience ascribed

Table 10

Mean Differences in Perceptions of Importance of Program Goals by Age

Program Goals	Age in Years			F Ratio
	Under 35	35-44	Over 44	
1. Provide foundation for doctoral study	2.96	2.90	2.86	0.18
2. Expand the body of nursing knowledge	4.20	4.01	4.08	1.02
3. Prepare expert nurse clinicians	3.89	3.83	4.19	1.58
4. Prepare nursing education leaders	4.40	4.33	4.49	0.58
5. Improve quality of nursing education	4.53	4.39	4.54	0.99
6. Enhance nurse educator's teaching	4.25	4.08	4.38	1.82
7. Satisfy desire for intellectual stimulation and growth	4.15	3.89	3.81	2.88
8. Prepare expert nurse clinicians	3.53	3.67	3.57	0.36
9. Improve quality of nursing inservice	3.93	3.99	3.84	0.39
10. Promote individual's professional growth	4.01	3.96	3.94	0.13
11. Enhance opportunities for advancement	3.48	3.63	3.40	0.87
12. Improve organization and delivery of nursing education programs	4.08	3.99	4.13	0.46
13. Improve nursing practice	4.32	4.28	4.38	0.21
14. Increase monetary rewards	3.10	2.97	2.94	0.62
15. Advance nursing as a profession	4.32	4.03	4.00	3.15*
16. Increase personal, professional prestige	3.07	3.07	2.89	0.38

*Statistically significant at .05 level.

Table 11

Mean Differences in Perceptions of Importance of Program Goals
by Years of Teaching Experience in Nursing

Program Goals	Years of Experience					F Ratio
	<1	1-4	5-8	9-12	>12	
1. Provide foundation for doctoral study	2.96	2.79	2.94	3.08	3.00	0.60
2. Expand the\body of nursing knowledge	4.30	4.14	4.13	3.92	4.24	0.89
3. Prepare expert nurse clinicians	3.78	3.79	3.91	4.00	4.24	1.13
4. Prepare nursing education leaders	4.44	4.42	4.47	4.35	4.14	1.12
5. Improve quality of nursing education	4.59	4.44	4.52	4.46	4.36	0.42
6. Enhance nurse educator's teaching	4.30	4.10	4.15	4.27	4.48	1.33
7. Satisfy desire for intellectual stimulation and growth	4.33	3.78	4.22	4.00	3.93	2.78*
8. Prepare expert nurse clinicians	3.89	3.46	3.63	3.45	3.62	0.99
9. Improve quality of nursing inservice	4.04	3.96	3.97	3.87	3.86	0.23
10. Promote individual's professional growth	4.11	3.82	4.17	3.97	4.00	1.29
11. Enhance opportunities for advancement	3.52	3.42	3.52	3.57	3.59	0.29
12. Improve organization and delivery of nursing education programs	3.92	4.18	4.03	3.87	4.21	1.19
13. Improve nursing practice	4.44	4.30	4.25	4.17	4.48	0.91
14. Increase monetary rewards	3.15	3.04	3.07	2.95	3.00	0.20
15. Advance nursing as a profession	4.48	4.22	4.20	3.85	4.10	2.19
16. Increase personal, professional prestige	3.33	3.08	3.08	2.82	3.10	0.84

*Statistically significant at .05 level.

Table 12

Mean Differences in Perceptions of Importance of Program Goals by Years of Non-Teaching Nursing Work Experience

Program Goals	Years of Experience				F Ratio
	<5	5-8	9-12	>12	
1. Provide foundation for doctoral study	3.00	2.83	2.89	2.87	0.37
2. Expand the body of nursing knowledge	4.09	4.12	4.32	4.13	0.52
3. Prepare expert nurse clinicians	3.90	4.00	3.97	3.75	0.25
4. Prepare nursing education leaders	4.38	4.29	4.27	4.81	2.43
5. Improve quality of nursing education	4.46	4.45	4.46	4.67	0.40
6. Enhance nurse educator's teaching	4.21	4.24	4.27	4.06	0.25
7. Satisfy desire for intellectual stimulation and growth	4.05	4.15	3.82	3.81	0.99
8. Prepare expert nurse clinicians	3.52	3.63	3.79	3.69	0.62
9. Improve quality of nursing inservice	3.81	4.05	4.21	4.12	2.59*
10. Promote individual's professional growth	3.93	4.07	4.00	4.12	0.42
11. Enhance opportunities for advancement	3.55	3.44	3.55	3.44	0.21
12. Improve organization and delivery of nursing education programs	4.00	4.17	4.17	4.25	0.88
13. Improve nursing practice	4.29	4.34	4.38	4.50	0.42
14. Increase monetary rewards	3.08	3.12	2.96	2.81	0.52
15. Advance nursing as a profession	4.13	4.24	4.10	4.37	0.49
16. Increase personal, professional prestige	2.95	3.29	3.07	3.25	1.15

*Statistically significant at .05 level.

greater importance to the program goal of improving quality of nursing inservice than did those with five or fewer years of non-teaching nursing work experience.

Nature of employing program. Two statistically significant mean differences in perceptions of importance of program goals according to nature of employing program were demonstrated, as shown in Table 13. The Scheffé test indicated that respondents involved in university degree programs ascribed greater importance to the program goal of providing a foundation for doctoral study than did those involved in health care agency inservice programs and in hospital diploma programs. Additionally, the Scheffé test showed that Alberta nurse educators involved in health care agency inservice programs ascribed less importance to satisfying desire for intellectual stimulation and growth than did respondents involved in hospital diploma programs, college diploma programs and university degree programs.

Administrative position. Two statistically significant mean differences in perceptions of importance of program goals according to administrative position were demonstrated. Table 14 shows these statistically significant mean differences. Alberta nurse educators with administrative positions at the co-ordinator level ascribed greater importance to the program goals of satisfying desire for intellectual stimulation and growth and promoting individual's professional growth than did those with administrative positions at higher than co-ordinator level.

Table 13

Mean Differences in Perceptions of Importance of Program Goals by Nature of Employing Program

Program Goals	Nature of Program					
	Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree	F Ratio
1. Provide foundation for doctoral study	2.59	2.88	2.74	3.05	3.48	5.84***
2. Expand the body of nursing knowledge	4.33	3.70	4.15	4.32	4.02	1.96
3. Prepare expert nurse clinicians	4.00	3.59	3.84	3.89	4.14	1.15
4. Prepare nursing education leaders	4.45	4.18	4.40	4.46	4.26	0.81
5. Improve quality of nursing education	4.45	4.35	4.47	4.51	4.42	0.16
6. Enhance nurse educator's teaching	4.14	4.00	4.17	4.46	4.22	1.21
7. Satisfy desire for intellectual stimulation and growth	3.45	3.94	4.04	4.19	4.12	2.60*
8. Prepare expert nurse clinicians	3.54	3.35	3.57	3.62	3.64	0.25
9. Improve quality of nursing inservice	4.14	3.65	3.98	3.92	3.82	1.12
10. Promote individual's professional growth	3.54	3.88	3.96	4.16	4.12	1.95
11. Enhance opportunities for advancement	3.09	3.70	3.47	3.67	3.58	1.69

***Statistically significant at .001 level.

*Statistically significant at .05 level.

Table 13 (continued)

Program Goals	Nature of Program					F Ratio
	Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree	
12. Improve organization and delivery of nursing education programs	4.09	4.18	4.17	4.13	3.76	2.16
13. Improve nursing practice	4.36	4.23	4.29	4.49	4.24	0.65
14. Increase monetary rewards	2.82	3.29	3.08	3.08	3.00	0.66
15. Advance nursing as a profession	4.41	4.23	4.11	4.19	4.12	0.54
16. Increase personal, professional prestige	3.04	3.65	2.91	2.89	3.28	2.26

Table 14

Mean Differences in Perceptions of Importance of Program Goals by Administrative Position

Program Goals	Administrative Position		T Value
	Co-ordinator	Higher	
1. Provide foundation for doctoral study	2.93	3.00	-0.19
2. Expand the body of nursing knowledge	4.32	3.87	1.46
3. Prepare expert nurse clinicians	4.10	3.75	1.05
4. Prepare nursing education leaders	4.45	4.25	0.88
5. Improve quality of nursing education	4.58	4.43	0.65
6. Enhance nurse educator's teaching	4.16	4.31	-0.54
7. Satisfy desire for intellectual stimulation and growth	4.26	3.50	2.92**
8. Prepare expert nurse clinicians	3.32	3.62	-0.89
9. Improve quality of nursing inservice	3.93	3.62	1.24
10. Promote individual's professional growth	4.10	3.50	2.35*
11. Enhance opportunities for advancement	3.48	3.44	0.14
12. Improve organization and delivery of nursing education programs	4.00	4.19	-0.73
13. Improve nursing practice	4.39	4.31	0.36
14. Increase monetary rewards	3.03	3.12	-0.34
15. Advance nursing as a profession	4.22	4.19	0.14
16. Increase personal, professional prestige	2.97	3.19	-0.61

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Type of employment. One statistically significant mean difference in perceptions of importance of program goals according to type of employment was demonstrated, as shown in Table 15. Alberta nurse educators employed on a permanent basis ascribed greater importance to expanding the body of nursing knowledge as a program goal than did those employed on a temporary basis.

Percentage of workload directly related to teaching function. As Table 16 shows, no statistically significant mean differences in perceptions of importance of program goals according to the percentage of respondents' workload directly related to teaching function was demonstrated. It had been expected that respondents with the least percentage of workload directly related to their teaching function might have perceived the importance of some program goals differently than respondents with the most percentage of workload directly related to teaching function.

Instructional setting. Five statistically significant mean differences in perceptions of importance of program goals according to instructional setting were demonstrated. Table 17 shows these statistically significant mean differences. The Scheffé test was unable to determine between which groups of educators, grouped according to instructional setting, the statistically significant mean difference in perceptions of importance of enhancing nurse educators' teaching as a program goal existed. However, the data showed that Alberta nurse educators who taught mainly in classroom settings consistently ascribed the least importance, in comparison with the

Table 15

Mean Differences in Perceptions of Importance of Program Goals by Type of Employment

Program Goals	Type of Employment		T Value
	Temporary	Permanent	
1. Provide foundation for doctoral study	3.05	2.92	0.73
2. Expand the body of nursing knowledge	3.87	4.19	-2.07*
3. Prepare expert nurse clinicians	3.70	3.96	-1.40
4. Prepare nursing education leaders	4.42	4.36	0.52
5. Improve quality of nursing education	4.46	4.46	0.04
6. Enhance nurse educator's teaching	4.07	4.24	-1.15
7. Satisfy desire for intellectual stimulation and growth	3.95	4.03	-0.51
8. Prepare expert nurse clinicians	3.62	3.57	0.31
9. Improve quality of nursing inservice	3.90	3.93	-0.20
10. Promote individual's professional growth	3.95	3.99	-0.25
11. Enhance opportunities for advancement	3.65	3.48	1.03
12. Improve organization and delivery of nursing education programs	3.85	4.11	-1.78
13. Improve nursing practice	4.25	4.33	-0.57
14. Increase monetary rewards	3.31	3.00	1.83
15. Advance nursing as a profession	4.12	4.17	-0.30
16. Increase personal, professional prestige	3.30	3.00	1.48

*Statistically significant at .05 level.

Table 16

Mean Differences in Perceptions of Importance of Program Goals by Percentage of Workload Directly Related to Teaching Function

Program Goals	Workload Related to Teaching Function			
	<50%	51-75%	>75%	F Ratio
1. Provide foundation for doctoral study	3.07	2.93	2.92	0.39
2. Expand the body of nursing knowledge	4.07	4.17	4.14	0.15
3. Prepare expert nurse clinicians	3.98	4.06	3.82	1.21
4. Prepare nursing education leaders	4.38	4.38	4.37	0.01
5. Improve quality of nursing education	4.51	4.52	4.40	0.65
6. Enhance nurse educator's teaching	4.33	4.13	4.21	0.73
7. Satisfy desire for intellectual stimulation & growth	3.98	4.08	3.98	0.26
8. Prepare expert nurse clinicians	3.62	3.70	3.51	0.76
9. Improve quality of nursing inservice	4.07	3.95	3.87	0.98
10. Promote individual's professional growth	3.83	4.10	3.96	1.06
11. Enhance opportunities for advancement	3.57	3.49	3.50	0.11
12. Improve organization and delivery of nursing education programs	4.05	3.98	4.10	0.37
13. Improve nursing practice	4.43	4.26	4.29	0.64
14. Increase monetary rewards	3.12	3.00	3.06	0.19
15. Advance nursing as a profession	4.21	4.15	4.14	0.10
16. Increase personal, professional prestige	3.12	3.00	3.04	0.14

Table 17

Mean Differences in Perceptions of Importance of Program Goals by Instructional Setting

Program Goals	Instructional Setting				
	Clinical Mainly	Classroom Mainly	Clinical & Classroom Equally	Other	F Ratio
1. Provide foundation for doctoral study	2.75	2.91	3.08	3.17	1.69
2. Expand the body of nursing knowledge	4.08	3.75	4.32	4.50	4.89**
3. Prepare expert nurse clinicians	3.82	3.70	4.06	4.17	1.54
4. Prepare nursing education leaders	4.31	4.23	4.44	4.00	1.44
5. Improve quality of nursing education	4.39	4.48	4.49	4.67	0.39
6. Enhance nurse educator's teaching	4.07	4.14	4.33	4.83	2.72*
7. Satisfy desire for intellectual stimulation and growth	3.96	3.86	4.10	4.67	1.74
8. Prepare expert nurse clinicians	3.62	3.16	3.70	4.17	3.51*
9. Improve quality of nursing inservice	3.90	3.79	3.98	4.50	1.46
10. Promote individual's professional growth	3.96	3.77	4.05	4.83	2.70*
11. Enhance opportunities for advancement	3.49	3.47	3.53	3.83	0.27
12. Improve organization and delivery of nursing education programs	4.08	3.82	4.15	4.33	1.83
13. Improve nursing practice	4.25	4.27	4.35	4.00	0.36
14. Increase monetary rewards	2.98	2.95	3.12	3.67	1.25
15. Advance nursing as a profession	4.07	3.91	4.32	4.67	3.09*
16. Increase personal, professional prestige	2.84	3.07	3.15	4.00	2.46

**Statistically significant at .01 level.
*Statistically significant at .05 level.

educators who taught mainly in clinical settings, educators who taught equally in clinical and classroom settings and educators who taught in "other" settings, to the program goals of: expanding the body of nursing knowledge; preparing expert nurse clinicians; promoting individual's professional growth; and advancing nursing as a profession.

Geographic location of employment. As Table 18 shows, no statistically significant mean differences in perceptions of importance of program goals according to geographic location of employment were demonstrated. Presumably, nurse educators who taught in Edmonton, Calgary and elsewhere in Alberta perceived the importance of program goals similarly.

Educational Preparation

Highest level of nursing education. Two statistically significant mean differences in perceptions of importance of program goals according to respondents' highest level of nursing education were demonstrated, as shown in Table 19. The Scheffé test indicated a tendency for respondents' perceptions of importance of increasing personal, professional prestige as a program goal to increase directly with level of nursing education. The Scheffé test also showed that respondents with only a baccalaureate degree in nursing ascribed less importance to providing a foundation for doctoral study as a program goal than did respondents with master's degrees in nursing. Possibly, respondents with baccalaureate degrees in nursing were more concerned with acquiring master's level than doctoral preparation,

Table 18

Mean Differences in Perceptions of Importance of Program Goals
by Geographic Location of Employment

Program Goals	Geographic Location of Employment			F Ratio
	Calgary	Edmonton	Elsewhere	
1. Provide foundation for doctoral study	2.88	2.94	3.12	0.49
2. Expand the body of nursing knowledge	4.20	4.09	4.24	0.46
3. Prepare expert nurse clinicians	3.86	3.93	3.92	0.07
4. Prepare nursing education leaders	4.47	4.34	4.32	0.62
5. Improve quality of nursing education	4.51	4.46	4.32	0.55
6. Enhance nurse educator's teaching	4.27	4.17	4.36	0.76
7. Satisfy desire for intellectual stimulation and growth	4.21	3.95	4.00	1.53
8. Prepare expert nurse clinicians	3.59	3.52	3.88	1.21
9. Improve quality of nursing inservice	3.69	3.99	4.00	2.70
10. Promote individual's professional growth	4.00	3.97	4.04	0.08
11. Enhance opportunities for advancement	3.57	3.46	3.72	0.96
12. Improve organization and delivery of nursing education programs	4.12	4.08	3.88	0.70
13. Improve nursing practice	4.37	4.27	4.48	0.99
14. Increase monetary rewards	3.20	3.00	3.08	0.81
15. Advance nursing as a profession	4.25	4.11	4.32	0.92
16. Increase personal, professional prestige	2.88	3.11	3.08	0.78

Table 19

Mean Differences in Perceptions of Importance of Program Goals by Highest Level of Nursing Education

Program Goals	Educational Level			F Ratio
	Diploma	Baccalaureate	Master's or Doctorate	
1. Provide foundation for doctoral study	2.93	2.85	3.36	3.67*
2. Expand the body of nursing knowledge	4.10	4.14	4.06	0.15
3. Prepare expert nurse clinicians	3.76	3.87	4.26	2.37
4. Prepare nursing education leaders	4.38	4.37	4.38	0.00
5. Improve quality of nursing education	4.34	4.48	4.53	0.53
6. Enhance nurse educator's teaching	4.00	4.22	4.38	1.69
7. Satisfy desire for intellectual stimulation and growth	3.96	3.98	4.20	0.86
8. Prepare expert nurse clinicians	3.65	3.55	3.65	0.20
9. Improve quality of nursing inservice	4.07	3.93	2.85	0.54
10. Promote individual's professional growth	3.96	3.94	4.26	1.78
11. Enhance opportunities for advancement	3.55	3.46	3.70	1.00
12. Improve organization and delivery of nursing education programs	4.00	4.11	3.88	1.04
13. Improve nursing practice	4.27	4.33	4.20	0.39
14. Increase monetary rewards	3.03	3.03	3.12	0.12
15. Advance nursing as a profession	4.17	4.14	4.32	0.56
16. Increase personal, professional prestige	3.48	2.92	3.38	4.88**

**Statistically significant at .01 level.
*Statistically significant at .05 level.

whereas respondents already in possession of master's degrees in nursing were in more of a position to consider doctoral preparation.

Highest level of non-nursing education. One statistically significant mean difference in perceptions of importance of the 16 program goals according to highest level of non-nursing education was demonstrated, as shown in Table 20. Nurse educators with high school as their highest level of non-nursing education ascribed greater importance to improving quality of nursing inservice than did respondents with higher than high school as their highest level of non-nursing education.

Nature of initial nursing preparation. Two statistically significant mean differences in perceptions of importance of program goals according to nature of initial nursing preparation were demonstrated. These statistically significant mean differences are shown in Table 21. Alberta nurse educators whose initial nursing preparation was at the baccalaureate degree level ascribed greater importance to the program goal of improving nursing practice than did respondents whose initial nursing preparation was at the diploma level. Possibly, nurse educators prepared initially at the diploma level had been more acculturated to the nursing practice delivered in the hospital setting, at least, and saw fewer deficiencies than did nurse educators prepared initially at the baccalaureate level. Additionally, nurse educators who had been initially prepared in nursing at the diploma level ascribed greater importance to the program goal of increasing personal, professional prestige than did those prepared initially at the

Table 20

Mean Differences in Perceptions of Importance of Program Goals
by Highest Level of Non-Nursing Education

Program Goals	Educational Level		T Value
	High School	Other	
1. Provide foundation for doctoral study	2.87	3.17	-1.71
2. Expand the body of nursing knowledge	4.14	4.10	0.26
3. Prepare expert nurse clinicians	3.88	3.97	-0.51
4. Prepare nursing education leaders	4.40	4.32	0.62
5. Improve quality of nursing education	4.46	4.49	-0.21
6. Enhance nurse educator's teaching	4.20	4.27	-0.47
7. Satisfy desire for intellectual stimulation and growth	4.03	4.00	0.24
8. Prepare expert nurse clinicians	3.60	3.46	0.73
9. Improve quality of nursing inservice	4.00	3.68	2.19*
10. Promote individual's professional growth	4.04	3.76	1.80
11. Enhance opportunities for advancement	3.54	3.36	1.04
12. Improve organization and delivery of nursing education programs	4.09	3.90	1.26
13. Improve nursing practice	4.30	4.32	-0.08
14. Increase monetary rewards	3.05	3.00	0.34
15. Advance nursing as a profession	4.20	3.97	1.45
16. Increase personal, professional prestige	3.08	2.97	0.55

*Statistically significant at .05 level.

Table 21

Mean Differences in Perceptions of Importance of Program Goals by Nature of Initial Nursing Preparation

Program Goals	Nature of Education		T Value
	Diploma	Baccalaureate	
1. Provide foundation for doctoral study	2.94	2.94	-0.04
2. Expand the body of nursing knowledge	4.15	4.04	0.84
3. Prepare expert nurse clinicians	3.94	3.85	0.54
4. Prepare nursing education leaders	4.37	4.40	-0.20
5. Improve quality of nursing education	4.43	4.60	-1.86
6. Enhance nurse educator's teaching	4.17	4.36	-1.43
7. Satisfy desire for intellectual stimulation and growth	3.98	4.11	-0.89
8. Prepare expert nurse clinicians	3.63	3.41	1.28
9. Improve quality of nursing inservice	3.98	3.79	1.42
10. Promote individual's professional growth	4.01	3.92	0.60
11. Enhance opportunities for advancement	3.55	3.38	1.16
12. Improve organization and delivery of nursing education program	4.06	4.07	-0.14
13. Improve nursing practice	4.25	4.49	-1.94*
14. Increase monetary rewards	3.08	2.91	1.20
15. Advance nursing as a profession	4.17	4.17	0.03
16. Increase personal, professional prestige	3.15	2.75	2.22*

*Statistically significant at .05 level.

baccalaureate level.

Focus of baccalaureate in nursing preparation. As can be seen from Table 22, no statistically significant mean differences in perceptions of importance of the 16 program goals between nurse educators with generalized baccalaureate degrees in nursing and those with specialized baccalaureate degrees in nursing were demonstrated. Possibly the focus of respondents' baccalaureate degree in nursing programs was not as different as the designation of their program focus indicated.

Time and Geographic Location of Educational Preparation

Year in which highest level of nursing education completed. No statistically significant mean differences in perceptions of importance of program goals according to year in which highest level of nursing education was completed were demonstrated, as can be seen from Table 23. Since year in which highest level of nursing education was completed is related to respondent age and only one statistically significant mean difference in perceptions of importance of program goals by age was demonstrated, this was not a surprising finding.

Year in which highest level of non-nursing education completed. One statistically significant mean difference in perceptions of importance of program goals according to year in which highest level of non-nursing education was completed was demonstrated. This statistically significant mean difference is shown in Table 24. The Scheffé test revealed that nurse educators who completed their highest

Table 22

Mean Differences in Perceptions of Importance of Program Goals by Focus of Baccalaureate in Nursing Preparation

Program Goals	Focus of Baccalaureate		T Value
	Generalized	Specialized	
1. Provide foundation for doctoral study	2.94	2.92	0.16
2. Expand the body of nursing knowledge	4.21	4.10	0.80
3. Prepare expert nurse clinicians	3.94	3.93	0.10
4. Prepare nursing education leaders	4.48	4.33	1.32
5. Improve quality of nursing education	4.54	4.47	0.67
6. Enhance nurse educator's teaching	4.21	4.28	-0.58
7. Satisfy desire for intellectual stimulation and growth	4.10	3.98	0.81
8. Prepare expert nurse clinicians	3.65	3.51	0.87
9. Improve quality of nursing inservice	4.01	3.87	1.12
10. Promote individual's professional growth	3.99	4.01	-0.16
11. Enhance opportunities for advancement	3.48	3.51	-0.27
12. Improve organization and delivery of nursing education program	4.14	4.03	0.83
13. Improve nursing practice	4.29	4.32	-0.29
14. Increase monetary rewards	3.11	3.00	0.81
15. Advance nursing as a profession	4.29	4.09	1.46
16. Increase personal, professional prestige	3.08	2.96	0.73

Table 23

Mean Differences in Perceptions of Improtance of Program Goals by Year in Which Highest Level of Nursing Education Completed

Program Goals	Year				
	Before 1968	1968-71	1972-75	After 1975	F Ratio
1. Provide foundation for doctoral study	2.96	2.82	2.94	3.09	0.66
2. Expand the body of nursing knowledge	3.98	4.07	4.14	4.39	1.86
3. Prepare expert nurse clinicians	3.88	4.06	3.68	4.11	2.08
4. Prepare nursing education leaders	4.37	4.29	4.45	4.43	0.60
5. Improve quality of nursing education	4.41	4.40	4.56	4.54	0.82
6. Enhance nurse educator's teaching	4.20	4.29	4.16	4.23	0.30
7. Satisfy desire for intellectual stimulation and growth	3.92	4.01	3.94	4.25	1.25
8. Prepare expert nurse clinicians	3.59	3.57	3.48	3.72	0.46
9. Improve quality of nursing inservice	3.92	3.82	4.04	3.98	0.83
10. Promote individual's professional growth	3.98	4.03	3.97	4.00	0.05
11. Enhance opportunities for advancement	3.65	3.41	3.35	3.75	2.25
12. Improve organization and delivery of nursing education program	4.12	4.03	4.01	4.14	0.28
13. Improve nursing practice	4.35	4.29	4.27	4.36	0.19
14. Increase monetary rewards	2.92	2.97	3.12	3.18	0.86
15. Advance nursing as a profession	4.04	4.12	4.13	4.50	2.45
16. Increase personal, professional prestige	3.04	2.98	3.06	3.18	0.27

Table 24

Mean Differences in Perceptions of Importance of Program Goals by Year in Which Highest Level of Non-Nursing Education Completed

Program Goals	Year					
	Before 1960	1960-63	1964-67	1968-71	After 1971	F Ratio
1. Provide foundation for doctoral study	2.92	2.95	3.02	2.78	3.03	0.43
2. Expand the body of nursing knowledge	4.19	3.87	4.36	4.13	4.00	1.84
3. Prepare expert nurse clinicians	3.92	3.76	4.16	3.78	4.00	1.05
4. Prepare nursing education leaders	4.41	4.31	4.51	4.33	4.32	0.51
5. Improve quality of nursing education	4.39	4.42	4.54	4.60	4.42	0.71
6. Enhance nurse educator's teaching	4.23	4.00	4.39	4.31	4.06	1.50
7. Satisfy desire for intellectual stimulation and growth	3.79	4.13	4.27	4.07	4.00	1.89
8. Prepare expert nurse clinicians	3.55	3.53	3.70	3.64	3.42	0.38
9. Improve quality of nursing inservice	4.01	3.81	4.07	3.95	3.77	3.94
10. Promote individual's professional growth	3.90	4.13	4.27	3.91	3.74	2.03
11. Enhance opportunities for advancement	3.51	3.53	3.67	3.35	3.42	0.69
12. Improve organization and delivery of nursing education program	4.12	3.95	4.11	4.11	3.97	0.40
13. Improve nursing practice	4.30	4.21	4.43	4.27	4.39	0.51
14. Increase monetary rewards	3.01	2.81	3.29	3.00	3.00	1.34
15. Advance nursing as a profession	4.06	4.00	4.54	4.09	4.13	2.56*
16. Increase personal, professional prestige	3.11	2.89	3.39	2.84	3.00	1.58

*Statistically significant at .05 level.

Table 25

Mean Differences in Perceptions of Importance of Program Goals by Geographic Location of Nursing Education

Program Goals	One Province or Country	More than One Province or Country	T Value
1. Provide foundation for doctoral study	2.79	3.24	-3.26***
2. Expand the body of nursing knowledge	4.07	4.23	-1.29
3. Prepare expert nurse clinicians	3.89	3.96	-0.41
4. Prepare nursing education leaders	4.40	4.34	0.55
5. Improve quality of nursing education	4.50	4.41	0.82
6. Enhance nurse educator's teaching	4.27	4.11	1.33
7. Satisfy desire for intellectual stimulation and growth	4.03	3.99	0.30
8. Prepare expert nurse clinicians	3.57	3.58	-0.06
9. Improve quality of nursing inservice	3.94	3.92	0.16
10. Promote individual's professional growth	3.97	4.03	-0.40
11. Enhance opportunities for advancement	3.45	3.62	-1.32
12. Improve organization and delivery of nursing education program	4.09	4.00	0.76
13. Improve nursing practice	4.33	4.27	0.52
14. Increase monetary rewards	3.04	3.05	-0.09
15. Advance nursing as a profession	4.14	4.24	-0.84
16. Increase personal, professional prestige	2.99	3.19	-1.34

***Statistically significant at .001 level.

level of non-nursing education between 1964 and 1967 ascribed greater importance to advancing nursing as a profession than did those whose highest level of non-nursing education was completed before 1960 and respondents whose highest level of non-nursing education was completed between 1960 and 1963.

Geographic location of nursing education. One statistically significant mean difference in perceptions of importance of program goals according to geographic location of nursing education was demonstrated, as shown in Table 25. Alberta nurse educators who had received their nursing education in more than one province or country ascribed greater importance to the program goal of providing a foundation for doctoral study than did those who had received their nursing education in only one province or country. Possibly respondents who had travelled were more future oriented than those who had not and they may have perceived greater importance in planning for further education.

Summary of Mean Differences in Perceptions of Program Goals

To summarize the program goals about which Alberta nurse educators most often differed in their perceptions of importance for a special purpose master's in nursing program for Alberta nurse educat[illegible], a frequency distribution of statistically significant mean differences in perceptions of importance of the 16 program goals was constructed. Table 26 represents this distribution. Only 20, or 7%, of 272 possible statistically significant mean differences in perceptions of importance of program goals were demonstrated.

The program goals about which perceptions of nurse educators differed most often were providing foundation for doctoral study,

Table 26

Frequency Distribution of Statistically Significant Mean Differences in Perceptions of Importance of 16 Program Goals

Program Goals	Frequency
Provide foundation for doctoral study	3
Satisfy desire for intellectual stimulation and growth	3
Advance nursing as a profession	3
Expand the body of nursing knowledge	2
Improve quality of nursing inservice	2
Promote individual's professional growth	2
Increase personal, professional prestige	2
Enhance nurse educator's teaching	1
Prepare expert nurse clinicians	1
Improve nursing practice	1
Total	20

satisfying desire for intellectual stimulation and growth and advancing nursing as a profession. In differing about the importance of the program goal of providing foundation for doctoral study, Alberta nurse educators may have been indicating their uncertainty about whether a special purpose master's in nursing program for Alberta nurse educators should be considered primarily as a terminal program or as a step in the progression to doctoral study. Respondents may also have been uncertain about whether a special purpose master's in nursing program for Alberta nurse educators should most benefit the participants, as exemplified by the program goal of satisfying desire for intellectual stimulation, or the nursing profession, as exemplified by the program goal of advancing nursing as a profession.

There were no statistically significant mean differences in Alberta nurse educators' perceptions of the importance of five of the 16 program goals: preparing expert nurse clinicians; preparing nursing education leaders; improving quality of nursing education; enhancing opportunities for advancement; and increasing monetary rewards. Alberta nurse educators as a group perceived the program goals of preparing expert nurse clinicians, preparing nursing education leaders, improving quality of nursing education and enhancing opportunities for advancement as highly important for a special purpose master's in nursing program for Alberta nurse educators. They also perceived increasing monetary rewards as a moderately important program goal.

To summarize the respondent personal and professional characteristics most often associated with statistically significant mean

differences in nurse educators' perceptions of importance of the 16 program goals, a frequency distribution was constructed. Table 27 shows the frequency distribution of personal and professional characteristics associated with statistically significant mean differences in perceptions of importance of program goals.

The personal and professional characteristic of Alberta nurse educators which was most frequently associated with statistically significant mean differences in the perceived importance of the 16 program goals was instructional setting. Four of the five statistically significant mean differences in perceptions of importance of program goals associated with respondents' instructional setting involved differences in perceptions between nurse educators who taught mainly in classroom settings and nurse educators who taught mainly in clinical settings, equally in clinical and classroom settings and in "other" settings. The implications of these differing perceptions of importance of program goals were not readily apparent.

Four of the personal and professional characteristics of the Alberta nurse educators were not associated with statistically significant mean differences in the perceived importance of the 16 program goals: year in which highest level of nursing education was completed; focus of baccalaureate in nursing preparation; percentage of workload directly related to teaching function; and geographic location of employment.

Table 27

Frequency Distribution of Statistically Significant Mean Differences in Personal and Professional Characteristics Associated with Perceptions of Importance of 16 Program Goals

Personal and Professional Characteristic	Frequency
Instructional setting	5
Highest level of nursing education	2
Nature of initial nursing preparation	2
Nature of employing program	2
Administrative position	2
Geographic location of nursing education	1
Highest level of non-nursing education	1
Type of employment	1
Age	1
Year in which highest level of non-nursing education completed	1
Years of teaching experience in nursing	1
Years of non-teaching nursing work experience	1
Total	20

MEAN DIFFERENCES IN PERCEPTIONS OF IMPORTANCE OF PROGRAM CHARACTERISTICS

Using t and F tests, mean differences in Alberta nurse educators' perceptions of importance of 40 program characteristics of a special purpose master's in nursing program for Alberta nurse educators were examined by personal and professional characteristics of respondents. The respondent personal and professional characteristics used to examine differences in means were those appearing in Tables 1, 2 and 3 of this chapter, with the exceptions of sex, focus of master's in nursing preparation and geographic location of master's in nursing education. The independent variable of sex could not be meaningfully examined because of large discrepancies in respective numbers. The independent variables of focus of master's in nursing preparation and geographic location of master's in nursing education lacked sufficient numbers for meaningful examination.

This section identifies and discusses these statistically significant mean differences. Scheffé tests for statistically significant mean differences demonstrated by F tests are contained in Appendix D.

Personal Characteristics

Age. Eight statistically significant mean differences in Alberta nurse educators' perceptions of the importance of 40 program characteristics according to respondents' age were demonstrated. Table 28 shows these statistically significant mean differences. The Scheffé test indicated that nurse educators' perceptions of the importance of emphasizing humanities, providing nontraditional

Table 28

Mean Differences in Perceptions of Importance of Program Characteristics by Age

Program Characteristics	Age in Years			
	Under 35	35-44	Over 44	F Ratio
1. Stresses use of instructional modules	3.29	3.42	3.17	0.79
2. Permits advanced student placement	3.65	3.49	3.94	2.76
3. Permits admission of non-nursing baccalaureates	2.04	2.14	1.97	0.29
4. Promotes accessibility of students to faculty	4.16	3.94	3.92	1.79
5. Equal emphasis on clinical specialization and teaching	3.88	3.87	4.19	3.93
6. Provides for credit transferability	4.43	4.09	4.30	4.26**
7. Stresses program individualization	4.50	4.20	4.24	3.73*
8. Primary emphasis on teaching	3.50	3.45	3.05	2.62
9. Stresses behavioral objectives	3.74	3.64	3.55	0.58
10. Primary emphasis on clinical specialization	2.90	3.19	3.19	2.03
11. Promotes pass/fail grading	3.05	2.56	2.45	5.08**
12. Prepares beginning researcher	3.61	3.28	3.29	2.93*
13. Requires nursing practice experience for admission	4.04	4.26	4.44	2.79
14. Stresses study of nursing issues	4.03	3.96	4.11	0.34
15. Emphasizes physical sciences	2.87	3.10	2.97	1.31

**Statistically significant at the .01 level.
*Statistically significant at the .05 level.

Table 28 (continued)

Program Characteristics	Age in Years			F Ratio
	Under 35	35-44	Over 44	
16. Stresses interdisciplinary classes	3.61	3.58	3.78	0.53
17. Promotes study of post-secondary system	3.59	3.37	3.32	1.74
18. Stresses curriculum development study	4.05	3.92	3.81	1.23
19. Promotes study of health care issues	4.12	4.12	4.32	0.90
20. Encourages independent study	4.06	4.04	4.11	0.07
21. Requires completion of research study	3.15	3.26	3.65	2.03
22. Provides credit for work experience	3.69	3.42	3.54	1.67
23. Stresses academic counselling	3.60	3.50	3.32	1.13
24. Emphasizes learning about disadvantaged nursing student	2.94	2.87	2.71	0.62
25. Requires nursing education research	2.94	2.86	2.64	0.98
26. Stresses course and program counselling	3.62	3.53	3.62	0.16
27. Emphasizes humanities	3.40	3.45	3.84	3.86*
28. Stresses change theory courses	4.11	3.92	4.22	1.89
29. Provides micro-teaching experience	3.75	3.62	3.94	1.38
30. Emphasizes learning about today's nursing student	3.64	3.43	3.67	1.34
31. Provides nontraditional clinical specialization	3.58	3.55	4.11	3.70*

**Statistically significant at the .01 level
*Statistically significant at the .05 level.

Table 28 (continued)

Program Characteristics	Age in Years			F Ratio
	Under 35	35-44	Over 44	
32. Distinguished by concentrated study in nursing	3.43	3.64	3.81	3.56
33. Requires clinical nursing research	2.59	3.08	3.30	6.48**
34. Emphasizes learning about student teacher relationships	3.64	3.70	3.42	1.27
35. Emphasizes study of teaching/learning	3.91	3.85	4.03	0.50
36. Emphasizes social sciences	3.22	3.47	3.46	2.26
37. Prepares informed research consumer	3.52	3.83	4.05	4.57**
38. Stresses follow-up of graduates	4.21	4.01	4.08	1.42
39. Stresses student counselling for personal problems	2.61	2.67	2.84	0.59
40. Integrates traditional clinical areas	3.11	3.28	3.08	0.72

**Statistically significant at the .01 level.
*Statistically significant at the .05 level.

clinical specialization, requiring clinical nursing research and stressing program individualization tended to vary directly with age. In contrast, the Scheffé test indicated that nurse educators' perceptions of the importance of providing credit transferability, promoting pass/fail grading, preparing a beginning researcher and preparing an informed consumer of research tended to vary indirectly with age. As respondents aged, they seemed to increasingly favour liberalization of program, as exemplified by emphasizing humanities and providing nontraditional clinical specialization, while at the same time desiring increased control over the direct process of learning, as exemplified by decreasing emphasis on providing for credit transferability and pass/fail grading.

Years of teaching experience in nursing. Six statistically significant mean differences in nurse educators' perceptions of the importance of program characteristics according to years of teaching experience in nursing were demonstrated, as shown in Table 29. For three of the statistically significant mean differences involving perceptions of importance of the program goals of primary emphasis on teaching, emphasizing physical sciences and providing for non-traditional clinical specialization, the Scheffé test was unable to distinguish between which groups of respondents grouped according to years of teaching experience in nursing the statistically significant mean differences existed. However, the Scheffé test did show that nurse educators who had taught in nursing for less than one year ascribed greater importance to promoting pass/fail grading than did those who had taught for nine to twelve years in nursing. Additionally,

Table 29

Mean Differences in Perceptions of Importance of Program Characteristics by Years of Teaching Experience in Nursing

Program Characteristics	Years of Experience					F Ratio
	<1	1-4	5-8	9-12	>12	
1. Stresses use of instructional modules	3.20	3.32	3.37	3.29	3.31	0.12
2. Permits advanced student placement	3.68	3.65	3.54	3.79	3.60	0.41
3. Permits admission of non-nursing baccalaureates	2.00	2.09	2.11	2.02	1.90	0.19
4. Promotes accessibility of students to faculty	4.29	4.04	4.10	4.05	3.76	1.28
5. Equal emphasis on clinical specialization and teaching	4.12	3.94	3.75	3.76	4.31	2.05
6. Provides for credit transferability	4.36	4.38	4.17	4.28	4.27	0.65
7. Stresses program individualization	4.44	4.22	4.58	4.31	4.21	2.07
8. Primary emphasis on teaching	3.72	3.62	3.23	3.28	3.07	2.55*
9. Stresses behavioral objectives	3.68	3.63	3.70	3.84	3.46	0.61
10. Primary emphasis on clinical specialization	2.88	2.97	3.03	3.08	3.34	0.81
11. Promotes pass/fail grading	3.48	2.93	2.70	2.40	2.59	3.44**
12. Prepares beginning researcher	3.84	3.45	3.43	3.36	3.14	1.66
13. Requires nursing practice experience for admission	4.54	4.20	4.02	4.05	4.40	1.84
14. Stresses study of nursing issues	3.92	4.13	3.93	3.89	4.07	4.00
15. Emphasizes physical sciences	3.25	2.98	2.77	2.76	3.30	2.80*

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 29 (continued)

Program Characteristics	Years of Experience					F Ratio
	<1	1-4	5-8	9-12	>12	
16. Stresses interdisciplinary classes	3.67	3.87	3.43	3.39	3.60	2.15
17. Promotes study of post-secondary system	3.42	3.56	3.53	3.31	3.33	0.59
18. Stresses curriculum development study	4.08	4.08	3.98	3.68	3.90	1.43
19. Promotes study of health care issues	4.12	4.27	4.03	4.03	4.20	0.86
20. Encourages independent study	4.21	3.97	4.09	4.10	3.90	0.57
21. Requires completion of research study	3.58	2.94	3.34	3.31	3.50	1.77
22. Provides credit for work experience	3.67	3.68	3.57	3.46	3.33	0.87
23. Stresses academic counselling	3.92	3.50	3.59	3.39	3.20	2.06
24. Emphasizes learning about disadvantaged nursing student	2.78	2.90	3.14	2.72	2.55	1.72
25. Requires nursing education research	3.13	2.80	2.96	2.74	2.83	0.57
26. Stresses course and program counselling	3.96	3.58	3.58	3.53	3.40	1.10
27. Emphasizes humanities	3.31	3.53	3.49	3.40	3.69	0.86
28. Stresses change theory courses	4.31	4.08	3.95	3.97	4.10	0.95
29. Provides micro-teaching experience	4.08	3.73	3.67	3.45	3.83	1.74
30. Emphasizes learning about today's nursing student	3.65	3.49	3.61	3.50	3.59	0.23
31. Provides nontraditional clinical specialization	3.93	3.67	3.42	3.45	3.07	2.36*

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 29 (continued)

Program Characteristics	Years of Experience					F Ratio
	<1	1-4	5-8	9-12	>12	
32. Distinguished by concentrated study in nursing	3.58	3.37	3.71	3.30	4.02	2.83*
33. Requires clinical nursing research	3.15	2.65	2.70	2.77	3.45	2.83*
34. Emphasizes learning about student teacher relationship	3.85	3.61	3.72	3.38	3.55	1.34
35. Emphasizes study of teaching/learning	3.88	3.97	3.97	3.65	3.96	1.09
36. Emphasizes social sciences	3.19	3.34	3.34	3.32	3.48	0.38
37. Prepares informed research consumer	3.73	3.58	3.68	3.67	4.00	0.83
38. Stresses follow-up of graduates	4.31	4.20	4.10	4.10	3.79	1.63
39. Stresses student counselling for personal problems	2.96	2.75	2.58	2.72	2.31	1.45
40. Integrates traditional clinical areas	3.35	3.23	3.19	3.02	3.00	0.63

**Statistically significant at .01 level.
*Statistically significant at .05 level.

the Scheffé test indicated a slight tendency for the importance nurse educators ascribed to the program characteristics of concentrated study in nursing and requiring clinical nursing research to vary directly with years of teaching experience in nursing. Perhaps as nurse educators taught longer in nursing their perceptions of need for emphasis on specifically nursing content, as exemplified by the program characteristics of concentrated study in nursing and requiring clinical nursing research, intensified.

Years of non-teaching nursing work experience. Eight statistically significant mean differences in respondents' perceptions of importance of program characteristics according to years of non-teaching nursing work experience were demonstrated. These statistically significant mean differences are shown in Table 30. The Scheffé test generally showed that nurse educators' perceptions of the importance of the following program characteristics varied directly with years of non-teaching nursing work experience: stressing use of instructional modules; stressing program individualization, requiring nursing practice experience for admission; encouraging independent study; emphasizing humanities; distinguished by concentrated study in nursing; requiring clinical nursing research; and stressing student counselling for personal problems. The greater the respondents' years of non-teaching nursing work experience, the more importance that was ascribed to program characteristics which promoted self-directed study, as exemplified by the program characteristics of stressing use of instructional modules and stressing program individualization. Additionally, increased years of nursing work experience

Table 30

Mean Differences in Perceptions of Importance of Program Characteristics by Years of Non-Teaching Nursing Work Experience

Program Characteristics	Years of Experience				F Ratio
	<5	5-8	9-12	>12	
1. Stresses use of instructional modules	3.33	3.35	2.88	3.87	3.29*
2. Permits advanced student placement	3.55	3.80	3.57	4.19	2.51
3. Permits admission of non-nursing baccalaureates	1.95	2.41	2.18	2.13	1.69
4. Promotes accessibility of students to faculty	3.99	4.12	4.00	4.27	0.59
5. Equal emphasis on clinical specialization and teaching	3.86	3.95	3.86	4.44	1.63
6. Provides for credit transferability	4.35	4.32	3.93	4.31	2.29
7. Stresses program individualization	4.44	4.36	3.96	4.19	3.01*
8. Primary emphasis on teaching	3.37	3.66	3.28	3.37	0.94
9. Stresses behavioral objectives	3.62	3.68	3.73	3.94	0.55
10. Primary emphasis on clinical specialization	2.98	3.17	3.11	3.25	0.58
11. Promotes pass/fail grading	2.83	3.07	2.67	2.23	1.68
12. Prepares beginning researcher	3.54	3.49	3.07	3.37	1.66
13. Requires nursing practice experience for admission	4.04	4.36	4.25	4.78	3.34*
14. Stresses study of nursing issues	3.98	4.17	3.75	4.27	1.61
15. Emphasizes physical sciences	2.97	2.85	3.00	3.20	0.54

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 30 (continued)

Program Characteristics	Years of Experience				F Ratio
	<5	5-8	9-12	>12	
16. Stresses interdisciplinary classes	3.60	3.69	3.39	4.07	1.53
17. Promotes study of post-secondary system	3.43	3.67	3.28	3.67	1.25
18. Stresses curriculum development study	3.96	4.00	3.78	4.13	0.57
19. Promotes study of health care issues	4.07	4.36	4.07	4.47	2.05
20. Encourages independent study	4.07	4.17	3.67	4.47	3.11*
21. Requires completion of research study	3.28	3.24	3.14	3.33	0.11
22. Provides credit for work experience	3.62	3.50	3.61	3.47	0.25
23. Stresses academic counselling	3.51	3.55	3.39	3.87	0.81
24. Emphasizes learning about disadvantaged nursing student	2.83	3.17	2.68	3.28	2.02
25. Requires nursing education research	2.89	2.80	3.11	2.64	0.63
26. Stresses course and program counselling	3.54	3.63	3.64	3.93	0.76
27. Emphasizes humanities	3.41	3.59	3.31	4.37	7.48***
28. Stresses change theory courses	4.04	4.17	3.90	4.44	1.64
29. Provides micro-teaching experience	3.68	3.95	3.69	3.94	1.09
30. Emphasizes learning about today's nursing student	3.53	3.74	3.59	3.69	0.54
31. Provides nontraditional clinical specialization	3.58	3.71	3.83	3.87	0.68

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 30 (continued)

Program Characteristics	Years of Experience <5	5-8	9-12	>12	F Ratio
32. Distinguished by concentrated study in nursing	3.51	3.36	3.79	4.19	2.86*
33. Requires clinical nursing research	2.74	2.78	3.39	3.53	3.69**
34. Emphasizes learning about student teacher relationship	3.63	3.74	3.52	3.69	0.37
35. Emphasizes study of teaching/learning	3.83	4.05	4.03	4.12	1.24
36. Emphasizes social sciences	3.25	3.44	3.45	3.69	1.60
37. Prepares informed research consumer	3.69	3.56	3.71	4.27	1.69
38. Stresses follow-up of graduates	4.12	4.17	4.03	4.19	0.18
39. Stresses student counselling for personal problems	2.54	2.86	2.59	3.50	4.28**
40. Integrates traditional clinical areas	3.09	3.17	3.17	3.81	2.31

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

tended to increase the importance respondents ascribed to the specifically nursing component of the program, as exemplified by the program characteristics of requiring nursing practice experience for admission, distinguished by concentrated study in nursing and requiring clinical nursing research. The greater the number of years of non-teaching nursing work experience, the more respondents perceived the program characteristic of stressing student counselling for personal problems to be important, perhaps reflecting their own educational experiences in completing the transition from worker to learner.

Nature of employing program. Ten statistically significant mean differences in respondents' perceptions of the importance of the 40 program characteristics according to nature of employing program were demonstrated. Table 31 shows these statistically significant mean differences

The Scheffé test was unable to distinguish between which groups of respondents grouped according to nature of employing program the statistically significant mean difference in perceptions of importance of the program characteristic of encouraging independent study existed. The Scheffé test did show, however, that six of the statistically significant mean differences in respondents' perceptions of program characteristics involved nurse educators teaching in university degree programs and those teaching in diploma programs. Nurse educators teaching in university degree programs tended to ascribe greater importance to the program characteristics of primary emphasis on clinical specialization, requiring completion of research

Table 31

Mean Differences in Perceptions of Importance of Program Characteristics by Nature of Employing Program

Program Characteristics	Nature of Program					F Ratio
	Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree	
1. Stresses use of instructional modules	3.57	3.22	3.35	3.28	3.19	0.57
2. Permits advanced student placement	3.86	3.72	3.72	3.51	3.45	1.11
3. Permits admission of non-nursing baccalaureates	1.62	3.05	2.12	1.86	1.96	4.68***
4. Promotes accessibility of students to faculty	4.05	3.89	4.02	4.13	4.06	0.25
5. Equal emphasis on clinical specialization and teaching	4.24	4.00	3.79	3.89	4.04	1.12
6. Provides for credit transferability	4.04	4.44	4.48	4.27	3.96	4.64***
7. Stresses program individualization	4.18	4.28	4.36	4.51	4.28	0.74
8. Primary emphasis on teaching	3.09	3.89	3.54	3.62	2.94	4.78***
9. Stresses behavioral objectives	3.86	3.78	3.72	3.78	3.30	2.14
10. Primary emphasis on clinical specialization	3.04	3.33	2.84	3.00	3.39	2.50*
11. Promotes pass/fail grading	2.33	3.12	2.97	2.84	2.61	1.74

***Statistically significant at the .001 level.
**Statistically significant at the .01 level.
*Statistically significant at the .05 level.

Table 31 (continued)

Program Characteristics	Nature of Program					
	Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree	F Ratio
12. Prepares beginning researcher	3.50	3.39	3.49	3.35	3.45	0.16
13. Requires nursing practice experience for admission	4.75	4.11	3.96	4.22	4.39	3.86**
14. Stresses study of nursing issues	4.35	3.67	3.99	3.94	4.10	1.53
15. Emphasizes physical sciences	3.10	3.18	2.85	3.00	3.04	0.78
16. Stresses interdisciplinary classes	3.75	3.89	3.56	3.69	3.52	0.64
17. Promotes study of post-secondary system	3.30	3.55	3.60	3.72	3.02	4.05**
18. Stresses curriculum development study	3.75	3.94	4.07	3.94	3.81	0.99
19. Promotes study of health care issues	4.45	4.05	4.18	4.11	4.02	1.01
20. Encourages independent study	4.26	3.83	4.10	4.28	3.77	2.35*
21. Requires completion of research study	3.55	3.05	2.95	3.14	3.98	5.96***
22. Provides credit for work experience	3.75	3.83	3.56	3.80	3.29	2.13
23. Stresses academic counselling	3.70	3.28	3.66	3.42	3.31	1.63
24. Emphasizes learning about disadvantaged nursing student	2.70	3.06	3.07	3.00	2.49	2.68*
25. Requires nursing education research	3.00	3.55	2.77	3.00	2.71	2.21

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 31 (continued)

Program Characteristics	Nature of Program					F Ratio
	Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree	
26. Stresses course and program counselling	3.60	3.67	3.68	3.77	3.25	1.94
27. Emphasizes humanities	3.54	3.78	3.39	3.72	3.44	1.59
28. Stresses change theory courses	4.23	4.11	4.11	4.04	3.94	0.55
29. Provides micro-teaching experience	3.64	4.00	3.69	3.80	3.72	0.46
30. Emphasizes learning about today's nursing student	3.41	3.61	3.61	3.83	3.42	1.16
31. Provides nontraditional clinical specialization	3.91	3.72	3.45	3.80	3.82	1.52
32. Distinguished by concentrated study in nursing	3.86	3.39	3.27	3.67	4.02	4.78***
33. Requires clinical nursing research	3.09	3.28	2.70	2.69	3.16	1.98
34. Emphasizes learning about student teacher relationship	3.43	3.55	3.72	3.78	3.48	1.18
35. Emphasizes study of teaching/learning	3.86	3.83	3.91	4.11	3.83	0.62
36. Emphasizes social sciences	3.23	3.44	3.26	3.47	3.42	0.64
37. Prepares informed research consumer	3.68	3.78	3.56	3.58	4.08	2.24
38. Stresses follow-up of graduates	4.18	4.11	4.04	4.33	4.06	0.88

***Statistically significant at the .001 level.
**Statistically significant at the .01 level.
*Statistically significant at the .05 level.

Table 31 (continued)

Program Characteristics	Nature of Program					F Ratio
	Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree	
39. Stresses student counselling for personal problems	2.59	3.00	2.61	2.69	2.70	0.50
40. Integrates traditional clinical areas	3.45	3.44	3.16	3.19	2.94	1.32

***Statistically significant at the .001 level.
**Statistically significant at the .01 level.
*Statistically significant at the .05 level.

and [program] distinguished by concentrated study in nursing, and lesser importance to primary emphasis on teaching, promoting study of post-secondary system and emphasizing learning about the disadvantaged nursing student, than did nurse educators involved in diploma programs. Additionally, the Scheffé test showed that nurse educators teaching in nursing assistant programs ascribed greater importance to the program characteristic of permitting admission of non-nursing baccalaureates than did nurse educators involved in diploma and degree programs. Possibly nurse educators teaching in nursing assistant programs, taken as a group, possessed fewer baccalaureate degrees in nursing than did nurse educators teaching in diploma and degree programs. The Scheffé test also showed that inservice nurse educators ascribed greater importance to requiring nursing practice experience for admission than did diploma nurse educators teaching in hospital programs.

Administrative position. One statistically significant mean difference in respondents' perceptions of the importance of the 40 program characteristics according to respondents' administrative position was demonstrated, as shown in Table 32. Respondents with administrative positions higher than the co-ordinator level ascribed greater importance to the program characteristic of integrating traditional clinical areas than did those with administrative positions at the co-ordinator level. Perhaps respondents at higher than the co-ordinator level were more concerned with long-range program planning than were respondents at the co-ordinator level, and may have perceived a need for broadening of the clinical

Table 32

Mean Differences in Perception of Importance of Program Characteristics by Administrative Position

Program Characteristics	Administrative Position		T Value
	Co-ordinator	Higher	
1. Stresses use of instructional modules	3.52	3.25	0.83
2. Permits advanced student placement	3.77	3.94	-0.53
3. Permits admission of non-nursing baccalaureates	2.37	2.06	0.79
4. Promotes accessibility of students to faculty	4.17	3.81	1.47
5. Equal emphasis on clinical specialization and teaching	3.97	4.06	-0.27
6. Provides for credit transferability	4.23	4.37	-0.58
7. Stresses program individualization	4.50	4.19	1.37
8. Primary emphasis on teaching	2.87	3.44	-1.67
9. Stresses behavioral objectives	3.62	3.62	-0.01
10. Primary emphasis on clinical specialization	2.87	3.25	-1.13
11. Promotes pass/fail grading	2.21	2.67	-1.03
12. Prepares beginning researcher	3.63	3.50	0.39
13. Requires nursing practice experience for admission	4.16	4.06	0.28
14. Stresses study of nursing issues	4.10	4.12	-0.10
15. Emphasizes physical sciences	2.90	3.00	-0.35

*Statistically significant at .05 level.

Table 32 (continued)

Program Characteristics	Administrative Position		T Value
	Co-ordinator	Higher	
16. Stresses interdisciplinary classes	3.64	3.87	-0.69
17. Promotes study of post-secondary system	3.35	3.37	-0.06
18. Stresses curriculum development study	3.64	4.25	-1.90
19. Promotes study of health care issues	4.13	4.19	-0.19
20. Encourages independent study	3.90	4.19	-0.92
21. Requires completion of research study	3.26	3.81	-1.35
22. Provides credit for work experience	3.64	3.31	0.93
23. Stresses academic counselling	3.52	3.56	-0.14
24. Emphasizes learning about disadvantaged nursing student	2.93	3.07	-0.37
25. Requires nursing education research	2.83	2.75	0.23
26. Stresses course and program counselling	3.32	3.44	-0.33
27. Emphasizes humanities	3.52	3.25	1.08
28. Stresses change theory courses	4.06	4.19	-0.44
29. Provides micro-teaching experience	3.55	4.12	-1.69
30. Emphasizes learning about today's nursing student	3.52	3.87	-1.21
31. Provides nontraditional clinical specialization	3.81	3.73	0.19
32. Distinguished by concentrated study in nursing	3.61	3.87	-0.85

*Statistically significant at .05 level.

Table 32 (continued)

Program Characteristics	Administrative Position		T Value
	Co-ordinator	Higher	
33. Requires clinical nursing research	2.74	3.19	-1.07
34. Emphasizes learning about student teacher relationship	3.52	3.69	-0.56
35. Emphasizes study of teaching/learning	3.70	4.00	-1.01
36. Emphasizes social sciences	3.29	3.25	0.16
37. Prepares informed research consumer	3.83	4.00	-0.51
38. Stresses follow-up of graduates	4.06	4.00	0.28
39. Stresses student counselling for personal problems	2.64	2.69	-0.11
40. Integrates traditional clinical areas	2.68	3.50	-2.38*

*Statistically significant at .05 level.

specialization component of the program.

Type of employment. Two statistically significant mean differences in nurse educators' perceptions of importance of the 40 program characteristics according to type of employment were demonstrated. Table 33 shows these statistically significant mean differences. Nurse educators employed on a temporary basis ascribed greater importance to requiring nursing practice experience for admission and requiring completion of a research study than did those employed on a permanent basis.

Percentage of workload directly related to teaching function. Five statistically significant mean differences in nurse educators' perceptions of the importance of 40 program characteristics according to percentage of respondents' workload directly related to teaching function were demonstrated. These statistically significant mean differences are shown in Table 34.

The Scheffé test suggested that the perceived importance of the program characteristic of requiring a research study tended to vary directly with percentage of workload directly related to teaching function, perhaps indicating that respondents who devoted the majority of their time to teaching functions perceived more need for research study than did those who devoted the majority of their time to non-teaching functions, such as administration. Additionally, the Scheffé test indicated that nurse educators with 51% to 75% of their workload directly related to their teaching function ascribed less importance to the program characteristics of providing credit for

Table 33

Mean Differences in Perceptions of Importance of Program Characteristics by Type of Employment

Program Characteristics	Type of Employment		T Value
	Temporary	Permanent	
1. Stresses use of instructional modules	3.32	3.31	0.07
2. Permits advanced student placement	3.51	3.67	-0.90
3. Permits admission of non-nursing baccalaureates	2.05	2.07	-0.10
4. Promotes accessibility of students to faculty	3.87	4.08	-1.32
5. Equal emphasis on clinical specialization and teaching	3.85	3.94	-0.53
6. Provides for credit transferability	4.28	4.29	-0.04
7. Stresses program individualization	4.36	4.34	0.12
8. Primary emphasis on teaching	3.49	3.38	0.54
9. Stresses behavioral objectives	3.67	3.65	0.12
10. Primary emphasis on clinical specialization	3.31	2.99	1.66
11. Promotes pass/fail grading	3.00	2.78	0.97
12. Prepares beginning researcher	3.54	3.43	0.57
13. Requires nursing practice experience for admission	4.44	4.13	2.19*
14. Stresses study of nursing issues	3.92	4.03	-0.70
15. Emphasizes physical sciences	3.20	2.92	1.65

*Statistically significant at .05 level.

Table 33 (continued)

Program Characteristics	Type of Employment		T Value
	Temporary	Permanent	
16. Stresses interdisciplinary classes	3.55	3.63	-0.40
17. Promotes study of post-secondary system	3.36	3.48	-0.68
18. Stresses curriculum development study	3.94	3.96	-0.07
19. Promotes study of health care issues	4.05	4.17	-0.73
20. Encourages independent study	4.08	4.04	0.24
21. Requires completion of research study	3.69	3.18	2.16*
22. Provides credit for work experience	3.48	3.60	-0.62
23. Stresses academic counselling	3.30	3.56	-1.43
24. Emphasizes learning about disadvantaged nursing student	2.71	2.93	-1.09
25. Requires nursing education research	2.88	2.88	0.03
26. Stresses course and program counselling	3.55	3.60	-0.25
27. Emphasizes humanities	3.53	3.50	0.19
28. Stresses change theory courses	4.13	4.06	0.44
29. Provides micro-teaching experience	3.79	3.72	0.36
30. Emphasizes learning about today's nursing student	3.53	3.59	-0.39
31. Provides nontraditional clinical specialization	3.76	3.63	0.64
32. Distinguished by concentrated study in nursing	3.53	3.58	-0.28

*Statistically significant at .05 level.

Table 33 (continued)

Program Characteristics	Type of Employment		T Value
	Temporary	Permanent	
33. Requires clinical nursing research	3.10	2.84	1.18
34. Emphasizes learning about student teacher relationship	3.50	3.66	-1.04
35. Emphasizes study of teaching/learning	3.84	3.93	-0.57
36. Emphasizes social sciences	3.39	3.33	0.39
37. Prepares informed research consumer	3.86	3.67	1.00
38. Stresses follow-up of graduates	4.13	4.11	0.16
39. Stresses student counselling for personal problems	2.68	2.67	0.06
40. Integrates traditional clinical areas	3.37	3.13	1.29

*Statistically significant at .05 level.

Table 34

Mean Differences in Perceptions of Importance of Program Characteristics by Percentage of Workload Directly Related to Teaching Function

Program Characteristics	Workload Related to Teaching Function			F Ratio
	<50%	51-75%	>75%	
1. Stresses use of instructional modules	3.50	3.18	3.32	1.20
2. Permits advanced student placement	3.76	3.78	3.53	1.35
3. Permits admission of non-nursing baccalaureates	2.36	1.91	2.05	1.84
4. Promotes accessibility of students to faculty	3.95	4.20	3.98	1.45
5. Equal emphasis on clinical specialization and teaching	3.88	3.88	3.97	0.20
6. Provides for credit transferability	4.31	4.19	4.32	0.63
7. Stresses program individualization	4.40	4.41	4.28	0.65
8. Primary emphasis on teaching	3.24	3.25	3.53	1.97
9. Stresses behavioral objectives	3.52	3.95	3.56	3.49*
10. Primary emphasis on clinical specialization	3.28	3.12	2.94	1.75
11. Promotes pass/fail grading	2.83	2.98	2.76	0.63
12. Prepares beginning researcher	3.64	3.42	3.40	0.90
13. Requires nursing practice experience for admission	4.20	4.28	4.15	0.37
14. Stresses study of nursing issues	4.17	3.96	3.97	0.80
15. Emphasizes physical sciences	3.05	2.95	2.94	0.22

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 34 (continued)

Program Characteristics	Workload Related to Teaching Function			
	<50%	51-75%	>75%	F Ratio
16. Stresses interdisciplinary classes	3.65	3.49	3.65	0.53
17. Promotes study of post-secondary system	3.60	3.30	3.49	1.28
18. Stresses curriculum development study	4.02	3.93	3.92	0.20
19. Promotes study of health care issues	4.12	4.07	4.18	0.34
20. Encourages independent study	4.15	3.91	4.08	0.98
21. Requires completion of research study	3.72	3.21	3.13	3.22*
22. Provides credit for work experience	3.75	3.24	3.69	4.88**
23. Stresses academic counselling	3.57	3.58	3.49	0.23
24. Emphasizes learning about disadvantaged nursing student	3.28	2.61	2.91	4.55**
25. Requires nursing education research	2.97	2.53	3.00	3.53*
26. Stresses course and program counselling	3.40	3.57	3.68	1.30
27. Emphasizes humanities	3.45	3.56	3.48	0.23
28. Stresses change theory courses	4.12	4.02	4.07	0.19
29. Provides micro-teaching experience	3.81	3.68	3.73	0.21
30. Emphasizes learning about today's nursing student	3.81	3.42	3.57	1.98
31. Provides nontraditional clinical specialization	3.71	3.66	3.61	0.11
32. Distinguished by concentrated study in nursing	3.81	3.54	3.53	1.11

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 34 (continued)

Program Characteristics	Workload Related to Teaching Function			F Ratio
	<50%	51-75%	>75%	
33. Requires clinical nursing research	3.00	2.97	2.82	0.43
34. Emphasizes learning about student teacher relationship	3.71	3.54	3.65	0.48
35. Emphasizes study of teaching/learning	4.02	3.85	3.92	0.50
36. Emphasizes social sciences	3.28	3.35	3.33	0.08
37. Prepares informed research consumer	3.83	3.64	3.68	0.40
38. Stresses follow-up of graduates	4.09	4.25	4.04	1.27
39. Stresses student counselling for personal problems	2.83	2.61	2.67	0.52
40. Integrates traditional clinical areas	3.05	3.12	3.23	0.54

**Statistically significant at .01 level.
*Statistically significant at .05 level.

work experience, emphasizing learning about the disadvantaged nursing student and requiring nursing education research than did either nurse educators with 50% or less of their workload directly related to their teaching function or those with more than 75% of their workload directly related to their teaching function. However, the Scheffé test showed that nurse educators whose teaching functions occupied 51% to 75% of their time ascribed greater importance to stressing behavioral objectives than did those whose teaching functions occupied either 50% or less of their time, or those whose teaching functions occupied more than 75% of their time.

Instructional setting. Five statistically significant mean differences in respondents' perceptions of the importance of program characteristics according to their instructional setting were demonstrated. Table 35 shows these statistically significant mean differences.

The small number (7) of respondents in the "other" category of nurse educators renders statistically significant mean differences involving just this group and one other group of respondents grouped according to instructional setting, suspect; therefore, little importance was attached to the finding of the Scheffé test that respondents who carried out their instructional duties in "other" settings ascribed greater importance to promoting pass/fail grading and permitting advanced student placement than did respondents who carried out their instructional duties mainly in the classroom setting.

The Scheffé test did, however, show that nurse educators who taught mainly in classroom settings ascribed less importance to

Table 35

Mean Differences in Perceptions of Importance of Program Characteristics by Instructional Setting

Program Characteristics	Instructional Setting				
	Clinical Mainly	Classroom Mainly	Clinical & Classroom Equally	Other	F Ratio
1. Stresses use of instructional modules	3.26	3.25	3.38	3.43	0.29
2. Permits advanced student placement	3.51	3.72	3.64	4.47	2.66*
3. Permits admission of non-nursing baccalaureates	1.84	2.17	2.14	2.86	2.07
4. Promotes accessibility of students to faculty	4.04	3.77	4.17	4.28	2.30
5. Equal emphasis on clinical specialization and teaching	3.82	3.66	4.11	4.14	2.56
6. Provides for credit transferability	4.35	3.98	4.36	4.57	3.16*
7. Stresses program individualization	4.32	4.29	4.37	4.57	0.30
8. Primary emphasis on teaching	3.48	3.18	3.43	3.71	0.97
9. Stresses behavioral objectives	3.67	3.36	3.79	3.57	1.98
10. Primary emphasis on clinical specialization	2.88	3.07	3.15	3.28	0.94
11. Promotes pass/fail grading	2.76	2.44	2.97	4.00	3.81**
12. Prepares beginning researcher	3.41	3.50	3.46	3.57	0.10
13. Requires nursing practice experience for admission	4.15	4.27	4.18	4.33	0.20

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 35 (continued)

Program Characteristics	Instructional Setting				F Ratio
	Clinical Mainly	Classroom Mainly	Clinical & Classroom Equally	Other	
14. Stresses study of nursing issues	3.79	3.86	4.19	4.67	4.14**
15. Emphasizes physical sciences	2.95	2.79	3.04	3.50	1.42
16. Stresses interdisciplinary classes	3.62	3.43	3.68	4.00	0.91
17. Promotes study of post-secondary system	3.52	3.34	3.50	3.67	0.45
18. Stresses curriculum development study	3.87	3.86	4.07	4.00	0.94
19. Promotes study of health care issues	4.13	3.98	4.20	4.83	2.06
20. Encourages independent study	3.98	4.04	4.11	4.17	0.28
21. Requires completion of research study	3.10	3.45	3.31	2.83	0.91
22. Provides credit for work experience	3.72	3.36	3.58	3.50	1.20
23. Stresses academic counselling	3.51	3.41	3.64	2.83	1.71
24. Emphasizes learning about disadvantaged nursing student	2.76	2.78	3.06	3.00	1.27
25. Requires nursing education research	2.70	3.00	2.97	2.80	0.87
26. Stresses course and program counselling	3.63	3.32	3.69	4.00	1.78
27. Emphasizes humanities	3.31	3.27	3.70	4.14	5.94***

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 35 (continued)

Program Characteristics	Instructional Setting: Clinical Mainly	Classroom Mainly	Clinical & Classroom Equally	Other	F Ratio
28. Stresses change theory courses	3.94	4.00	4.18	4.71	2.56
29. Provides micro-teaching experience	3.65	3.70	3.79	4.14	0.68
30. Emphasizes learning about today's nursing student	3.53	3.45	3.66	3.86	0.71
31. Provides nontraditional clinical specialization	3.67	3.37	3.79	3.57	1.46
32. Distinguished by concentrated study in nursing	3.38	3.70	3.61	4.43	2.46
33. Requires clinical nursing research	2.73	2.84	2.97	3.86	1.94
34. Emphasizes learning about student teacher relationship	3.51	3.58	3.74	4.00	1.45
35. Emphasizes study of teaching/learning	3.75	3.86	4.06	4.14	1.99
36. Emphasizes social sciences	3.27	3.20	3.45	3.57	1.18
37. Prepares informed research consumer	3.56	3.79	3.71	4.43	1.62
38. Stresses follow-up of graduates	4.01	3.98	4.22	4.57	2.05
39. Stresses student counselling for personal problems	2.51	2.48	2.84	3.28	2.53
40. Integrates traditional clinical areas	3.23	2.82	3.23	3.57	2.23

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

providing for credit transferability and emphasizing the humanities than did those who taught mainly in the clinical setting and those who taught equally in the clinical and classroom settings. Additionally, nurse educators who taught mainly in the clinical setting ascribed less importance to promoting study of health care issues than did nurse educators who taught equally in clinical and classroom settings.

Geographic location of employment. Two statistically significant mean differences in nurse educators' perceptions of importance of the 40 program characteristics according to geographic location of employment were demonstrated, as shown in Table 36. The Scheffé test showed that nurse educators employed in Calgary ascribed less importance to the program characteristic of requiring nursing practice experience for admission than did either respondents employed in either Edmonton or Elsewhere in Alberta. Similarly, the Scheffé test showed that nurse educators employed in Calgary ascribed less importance to the program characteristic of program distinguished by concentrated study in nursing than did those employed in other than Calgary or Edmonton.

Educational Preparation

Highest level of nursing education. Twelve statistically significant mean differences in Alberta nurse educators' perceptions of importance of the 40 program characteristics according to respondent's highest level of nursing education were demonstrated. These statistically significant mean differences are shown in Table 37.

The Scheffé test showed that for 11 of the 12 statistically

Table 36

Mean Differences in Perceptions of Importance of Program Characteristics by Geographic Location of Employment

Program Characteristics	Geographic Location of Employment			F Ratio
	Calgary	Edmonton	Elsewhere	
1. Stresses use of instructional modules	3.33	3.30	3.35	0.03
2. Permits advanced student placement	3.71	3.62	3.62	0.14
3. Permits admission of non-nursing baccalaureates	2.25	2.01	2.04	0.76
4. Promotes accessibility of students to faculty	4.04	4.03	4.09	0.04
5. Equal emphasis on clinical specialization and teaching	3.94	3.90	4.04	0.21
6. Provides for credit transferability	4.42	4.26	4.22	0.85
7. Stresses program individualization	4.54	4.29	4.30	1.86
8. Primary emphasis on teaching	3.37	3.39	3.52	0.16
9. Stresses behavioral objectives	3.81	3.63	3.48	1.01
10. Primary emphasis on clinical specialization	2.89	3.12	2.91	1.00
11. Promotes pass/fail grading	2.93	2.79	2.78	0.24
12. Prepares beginning researcher	3.73	3.41	3.17	2.74
13. Requires nursing practice experience for admission	3.88	4.24	4.48	3.90*
14. Stresses study of nursing issues	3.84	4.08	3.96	1.36
15. Emphasizes physical sciences	2.76	3.02	3.09	1.75

*Statistically significant at .05 level.

Table 36 (continued)

Program Characteristics	Geographic Location of Employment			F Ratio
	Calgary	Edmonton	Elsewhere	
16. Stresses interdisciplinary classes	3.64	3.59	3.74	0.22
17. Promotes study of post-secondary system	3.41	3.48	3.48	0.09
18. Stresses curriculum development study	4.06	3.97	3.65	1.70
19. Promotes study of health care issues	4.06	4.17	4.22	0.39
20. Encourages independent study	4.12	3.98	4.35	1.83
21. Requires completion of research study	3.44	3.23	3.13	0.62
22. Provides credit for work experience	3.50	3.60	3.61	0.22
23. Stresses academic counselling	3.50	3.52	3.56	0.04
24. Emphasizes learning about disadvantaged nursing student	2.84	2.92	2.91	0.10
25. Requires nursing education research	2.77	2.94	2.73	0.58
26. Stresses course and program counselling	3.62	3.53	3.96	1.86
27. Emphasizes humanities	3.50	3.47	3.73	0.89
28. Stresses change theory courses	4.06	4.06	4.18	0.19
29. Provides micro-teaching experience	3.90	3.64	4.04	2.46
30. Emphasizes learning about today's nursing student	3.56	3.57	3.73	0.27
31. Provides nontraditional clinical specialization	3.84	3.57	3.82	1.33
32. Distinguished by concentrated study in nursing	3.28	3.60	4.00	3.62*

*Statistically significant at .05 level.

Table 36 (continued)

Program Characteristics	Geographic Location of Employment			F Ratio
	Calgary	Edmonton	Elsewhere	
33. Requires clinical nursing research	2.82	2.83	3.41	2.16
34. Emphasizes learning about student teacher relationship	3.63	3.61	3.82	0.52
35. Emphasizes study of teaching/learning	3.90	3.90	4.04	0.27
36. Emphasizes social sciences	3.12	3.40	3.41	2.03
37. Prepares informed research consumer	3.77	3.66	3.86	0.48
38. Stresses follow-up of graduates	4.10	4.06	4.45	2.08
39. Stresses student counselling for personal problems	2.61	2.65	2.95	0.81
40. Integrates traditional clinical areas	3.04	3.20	3.27	0.53

*Statistically significant at .05 level.

Table 37

Mean Differences in Perceptions of Importance of Program Characteristics by Highest Level of Nursing Education

Program Characteristics	Educational Level			
	Diploma	Baccalaureate	Master's or Doctorate	F Ratio
1. Stresses use of instructional modules	3.32	3.35	3.12	0.73
2. Permits advanced student placement	3.92	3.60	3.65	1.34
3. Permits admission of non-nursing baccalaureates	2.73	1.98	1.91	5.12**
4. Promotes accessibility of students to faculty	3.92	4.04	4.23	1.03
5. Equal emphasis on clinical specialization and teaching	4.00	3.81	4.50	7.18***
6. Provides for credit transferability	4.27	4.33	4.12	1.10
7. Stresses program individualization	4.19	4.38	4.35	0.64
8. Primary emphasis on teaching	3.54	3.43	3.15	1.25
9. Stresses behavioral objectives	3.96	3.67	3.44	2.02
10. Primary emphasis on clinical specialization	3.08	2.93	3.56	5.04**
11. Promotes pass/fail grading	3.12	2.80	2.57	1.35
12. Prepares beginning researcher	3.19	3.45	3.59	1.12
13. Requires nursing practice experience for admission	4.43	4.07	4.53	4.25**
14. Stresses study of nursing issues	3.71	4.04	4.18	2.13

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 37 (continued)

Program Characteristics	Educational Level			
	Diploma	Baccalaureate	Master's or Doctorate	F Ratio
15. Emphasizes physical sciences	3.11	2.89	3.20	2.15
16. Stresses interdisciplinary classes	3.53	3.64	3.59	0.14
17. Promotes study of post-secondary system	3.32	3.56	3.11	3.41*
18. Stresses curriculum development study	3.82	3.94	3.15	1.12
19. Promotes study of health care issues	4.14	4.15	4.15	0.00
20. Encourages independent study	3.96	4.09	3.91	0.65
21. Requires completion of research study	2.96	3.19	3.97	6.20**
22. Provides credit for work experience	3.64	3.65	3.15	3.95*
23. Stresses academic counselling	3.75	3.50	3.44	0.93
24. Emphasizes learning about disadvantaged nursing student	3.07	2.92	2.54	2.12
25. Requires nursing education research	2.86	2.94	2.53	1.80
26. Stresses course and program counselling	3.71	3.62	3.35	1.26
27. Emphasizes humanities	3.71	3.43	3.62	1.78
28. Stresses change theory courses	3.82	4.10	4.12	1.35
29. Provides micro-teaching experience	3.78	3.68	3.91	0.82

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 37 (continued)

Program Characteristics	Educational Level			
	Diploma	Baccalaureate	Master's or Doctorate	F Ratio
30. Emphasizes learning about today's nursing student	3.39	3.60	3.56	0.54
31. Provides nontraditional clinical specialization	3.89	3.52	4.12	4.86**
32. Distinguished by concentrated study in nursing	3.61	3.41	4.32	10.94***
33. Requires clinical nursing research	3.25	2.68	3.44	7.15***
34. Emphasizes learning about student teacher relationship	3.57	3.64	3.57	0.13
35. Emphasizes study of teaching/learning	3.86	3.90	3.97	0.13
36. Emphasizes social sciences	3.32	3.34	3.38	0.05
37. Prepares informed research consumer	3.55	3.60	4.32	7.42***
38. Stresses follow-up of graduates	4.03	4.12	4.18	0.22
39. Stresses student counselling for personal problems	3.11	2.57	2.79	3.14*
40. Integrates traditional clinical areas	3.53	3.15	2.94	2.59

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

significant mean differences according to highest level of nursing education, the Alberta nurse educators with master's degrees perceived the importance of program characteristics differently than did either respondents with baccalaureate degrees and/or those with diplomas. Six, or half, of the statistically significant mean differences existed between nurse educators with master's degrees and those with baccalaureate degrees as their highest level of nursing education. Respondents with master's degrees ascribed greater importance to equal emphasis on clinical specialization and teaching, requiring nursing practice experience for admission, primary emphasis on clinical specialization and providing nontraditional clinical specialization than did those with baccalaureate degrees. In comparison, the Scheffé test showed that nurse educators with baccalaureate degrees as their highest level of nursing education ascribed greater importance to the program characteristics of promoting study of the post-secondary system and providing credit for work experience than did respondents with master's degrees as their highest level of nursing education.

Compared with nurse educators with either diplomas or with baccalaureate degrees as their highest level of nursing education, respondents with master's degrees ascribed greater importance to the three program characteristics of requiring completion of research project, preparing an informed consumer of research and program distinguished by concentrated study in nursing. Apparently, possession of a master's degree in nursing affected considerably respondents' perceptions of importance of program characteristics.

Additionally, respondents with master's degrees ascribed less importance to the program characteristics of permitting admission of non-nursing baccalaureates than did nurse educators with diplomas as their highest level of nursing education.

The Scheffé test also showed that nurse educators with baccalaureate degrees as their highest level of nursing education ascribed less importance than did either respondents with diplomas or master's degrees to the program characteristic of requiring clinical nursing research.

For the one statistically significant mean difference in perceptions of importance of program characteristics which did not involve nurse educators with master's degrees as their highest level of nursing education, the difference existed between respondents with diplomas who ascribed greater importance to the program characteristic of stressing student counselling for personal problems, than did those with baccalaureate degrees as their highest level of nursing education.

Highest level of non-nursing education. Three statistically significant mean differences in nurse educators' perceptions of importance of the 40 program characteristics according to respondents' highest level of non-nursing education were demonstrated. Table 38 shows these statistically significant mean differences. Nurse educators whose highest level of non-nursing education was high school ascribed greater importance to the program characteristics of primary emphasis on clinical specialization, promoting study of the post-secondary system and providing credit for work experience than did those whose highest level of non-nursing education was higher than

Table 38

Mean Differences in Perceptions of Importance of Program Characteristics by Highest Level of Non-Nursing Education

Program Characteristics	Educational Level		T Value
	High School	Other	
1. Stresses use of instructional modules	3.34	3.10	1.29
2. Permits advanced student placement	3.66	3.61	0.26
3. Permits admission of non-nursing baccalaureates	2.03	2.10	-0.35
4. Promotes accessibility of students to faculty	4.08	3.92	0.98
5. Equal emphasis on clinical specialization and teaching	3.94	3.79	0.80
6. Provides for credit transferability	4.32	4.20	0.80
7. Stresses program individualization	4.34	4.36	-0.10
8. Primary emphasis on teaching	3.47	3.08	2.08*
9. Stresses behavioral objectives	3.70	3.53	1.00
10. Primary emphasis on clinical specialization	2.99	3.13	-0.75
11. Promotes pass/fail grading	2.83	2.51	1.40
12. Prepares beginning researcher	3.46	3.38	0.40
13. Requires nursing practice experience for admission	4.16	4.22	-0.36
14. Stresses study of nursing issues	3.99	4.00	-0.04

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 38 (continued)

Program Characteristics	Educational Level		T Value
	High School	Other	
15. Emphasizes physical sciences	2.98	2.80	1.13
16. Stresses interdisciplinary classes	3.62	3.55	0.37
17. Promotes study of post-secondary system	3.52	3.10	2.45**
18. Stresses curriculum development study	4.02	3.72	1.90
19. Promotes study of health care issues	4.15	4.10	0.34
20. Encourages independent study	4.02	4.05	-0.16
21. Requires completion of research study	3.21	3.40	-0.82
22. Provides credit for work experience	3.62	3.26	2.13*
23. Stresses academic counselling	3.52	3.42	0.56
24. Emphasizes learning about disadvantaged nursing student	2.87	2.87	-0.01
25. Requires nursing education research	2.90	2.77	0.63
26. Stresses course and program counselling	3.64	3.45	1.05
27. Emphasizes humanities	3.53	3.40	0.87
28. Stresses change theory courses	4.09	3.97	0.77
29. Provides micro-teaching experience	3.74	3.72	0.15
30. Emphasizes learning about today's nursing student	3.59	3.47	0.66

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 38 (continued)

Program Characteristics	Educational Level		T Value
	High School	Other	
31. Provides nontraditional clinical specialization	3.63	3.67	-0.20
32. Distinguished by concentrated study in nursing	3.53	3.57	-0.22
33. Requires clinical nursing research	2.82	2.85	-0.10
34. Emphasizes learning about student teacher relationship	3.65	3.55	0.62
35. Emphasizes study of teaching/learning	3.95	3.77	1.15
36. Emphasizes social sciences	3.37	3.20	1.11
37. Prepares informed research consumer	3.64	3.90	-1.44
38. Stresses follow-up of graduates	4.16	3.92	1.60
39. Stresses student counselling for personal problems	2.71	2.67	0.22
40. Integrates traditional clinical areas	3.16	3.30	-0.77

high school.

Nature of initial nursing preparation. Five statistically significant mean differences in respondents' perceptions of importance of program characteristics according to nature of their initial nursing preparation were demonstrated, as shown in Table 39. Respondents prepared initially at the diploma level in nursing ascribed greater importance than did those prepared initially at the baccalaureate degree level in nursing to the following program characteristics: stressing behavioral objectives; promoting study of health care issues; emphasizing humanities; providing non-traditional clinical specialization; and emphasizing social sciences. These five program characteristics may have been ones in which diploma prepared respondents felt a greater lack than did baccalaureate prepared respondents.

Focus of baccalaureate in nursing preparation. Four statistically significant mean differences in nurse educators' perceptions of the importance of the 40 program characteristics according to respondents' focus of baccalaureate in nursing preparation were demonstrated. Table 40 shows these statistically significant mean differences. Nurse educators whose baccalaureate degree program was generalized in focus ascribed greater importance to the program characteristics of equal emphasis on clinical specialization and teaching, stressing interdisciplinary classes and stressing curriculum development study than did respondents whose baccalaureate degree was specialized in focus. However, the Scheffé test also showed that

Table 39

Mean Differences in Perceptions of Importance of Program Characteristics by Nature of Initial Nursing Preparation

Program Characteristics	Nature of Education		T Value
	Diploma	Baccalaureate	
1. Stresses use of instructional modules	3.32	3.30	0.13
2. Permits advanced student placement	3.70	3.46	1.56
3. Permits admission of non-nursing baccalaureate	2.10	1.92	0.96
4. Promotes accessibility of students to faculty	4.03	4.13	-0.74
5. Equal emphasis on clinical specialization and teaching	3.96	3.83	0.84
6. Provides for credit transferability	4.29	4.31	-0.21
7. Stresses program individualization	4.38	4.28	0.83
8. Primary emphasis on teaching	3.37	3.48	-0.64
9. Stresses behavioral objectives	3.75	3.40	2.32*
10. Primary emphasis on clinical specialization	3.11	2.81	1.83
11. Promotes pass/fail grading	2.73	3.04	-1.58
12. Prepares beginning researcher	3.38	3.65	-1.67
13. Requires nursing practice experience for admission	4.23	4.04	1.25
14. Stresses study of nursing issues	4.05	3.92	0.86

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 39 (continued)

Program Characteristics	Nature of Education		T Value
	Diploma	Baccalaureate	
15. Emphasizes physical sciences	3.00	2.84	1.08
16. Stresses interdisciplinary classes	3.64	3.53	0.72
17. Promotes study of health care issues	3.48	3.42	0.37
18. Stresses curriculum development study	3.94	4.04	-0.73
19. Promotes study of health care issues	4.22	3.92	2.24*
20. Encourages independent study	4.05	4.04	0.05
21. Requires completion of research study	3.23	3.47	-1.17
22. Provides credit for work experience	3.55	3.64	-0.65
23. Stresses academic counselling	3.53	3.47	0.41
24. Emphasizes learning about disadvantaged nursing student	2.88	2.90	-0.10
25. Requires nursing education research	2.86	2.90	-0.20
26. Stresses course and program counselling	3.61	3.53	0.53
27. Emphasizes humanities	3.59	3.17	3.24***
28. Stresses change theory courses	4.10	3.96	1.01
29. Provides micro-teaching experience	3.69	3.86	-1.14
30. Emphasizes learning about today's nursing student	3.56	3.60	-0.31

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 39 (continued)

Program Characteristics	Nature of Education		T Value
	Diploma	Baccalaureate	
31. Provides nontraditional clinical specialization	3.75	3.32	2.50**
32. Distinguished by concentrated study in nursing	3.59	3.49	0.57
33. Requires clinical nursing research	2.92	2.67	1.27
34. Emphasizes learning about student teacher relationship	3.61	3.67	-0.39
35. Emphasizes study of teaching/learning	3.91	3.89	0.20
36. Emphasizes social sciences	3.42	3.09	2.39*
37. Prepares informed research consumer	3.68	3.77	-0.51
38. Stresses follow-up of graduates	4.13	4.08	0.41
39. Stresses student counselling for personal problems	2.69	2.61	0.41
40. Integrates traditional clinical areas	3.20	3.04	1.02

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 40

Mean Differences in Perceptions of Importance of Program Characteristics by Focus of Baccalaureate in Nursing Preparation

Program Characteristics	Focus of Baccalaureate		T Value
	Generalized	Specialized	
1. Stresses use of instructional modules	3.23	3.37	-0.91
2. Permits advanced student placement	3.57	3.62	-0.32
3. Permits admission of non-nursing baccalaureate	2.06	1.89	1.00
4. Promotes accessibility of students to faculty	4.20	3.99	1.58
5. Equal emphasis on clinical specialization and teaching	4.13	3.80	2.14*
6. Provides for credit transferability	4.32	4.28	0.39
7. Stresses program individualization	4.35	4.39	-0.31
8. Primary emphasis on teaching	3.49	3.31	1.16
9. Stresses behavioral objectives	3.71	3.57	1.02
10. Primary emphasis on clinical specialization	2.89	3.12	-1.47
11. Promotes pass/fail grading	2.93	2.65	1.45
12. Prepares beginning researcher	3.53	3.42	0.77
13. Requires nursing practice experience for admission	4.23	4.11	0.87
14. Stresses study of nursing issues	4.01	4.06	-0.31
15. Emphasizes physical sciences	3.06	2.88	1.26

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 40 (continued)

Program Characteristics	Focus of Baccalaureate		T Value
	Generalized	Specialized	
16. Stresses interdisciplinary classes	3.87	3.49	2.50**
17. Promotes study of health care issues	3.62	3.40	1.47
18. Stresses curriculum development study	4.22	3.84	2.84**
19. Promotes study of health care issues	4.20	4.11	0.74
20. Encourages independent study	4.06	4.05	0.06
21. Requires completion of research study	3.32	3.29	0.12
22. Provides credit for work experience	3.65	3.49	1.03
23. Stresses academic counselling	3.52	3.44	0.53
24. Emphasizes learning about disadvantaged nursing student	2.83	2.86	-0.19
25. Requires nursing education research	2.81	2.90	-0.53
26. Stresses course and program counselling	3.64	3.54	0.65
27. Emphasizes humanities	3.45	3.46	-0.05
28. Stresses change theory courses	4.17	4.04	1.04
29. Provides micro-teaching experience	3.80	3.65	1.00
30. Emphasizes learning about today's nursing student	3.51	3.61	-0.69
31. Provides nontraditional clinical specialization	3.72	3.55	0.95

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 40 (continued)

Program Characteristics	Focus of Baccalaureate		T Value
	Generalized	Specialized	
32. Distinguished by concentrated study in nursing	3.46	3.60	-0.85
33. Requires clinical nursing research	2.54	2.90	-2.02*
34. Emphasizes learning about student teacher relationship	3.52	3.68	-1.24
35. Emphasizes study of teaching/learning	3.79	3.98	-1.33
36. Emphasizes social sciences	3.28	3.38	-0.75
37. Prepares informed researcher consumer	3.70	3.72	-0.14
38. Stresses follow-up of graduates	4.27	4.05	1.75
39. Stresses student counselling for personal problems	2.68	2.57	0.59
40. Integrates traditional clinical areas	3.11	3.11	0.02

**Statistically significant at .01 level.
*Statistically significant at .05 level.

nurse educators with specialized baccalaureate degrees ascribed greater importance to requiring clinical nursing research than did respondents with generalized baccalaureate degrees. Since two-thirds of the respondents with specialized baccalaureate degrees had reported their specialization as teaching and supervision, it may have been their perception that clinical nursing research was their greatest area of research need.

Time and Geographic Location of Educational Preparation

Year in which highest level of nursing education completed. Two statistically significant mean differences in nurse educators' perceptions of the importance of the 40 program characteristics according to respondents' year in which respondents completed their highest level of nursing education were demonstrated, as show in Table 41. The Scheffé test showed that more recent graduates tended to ascribe greater importance to promoting accessibility of students to faculty and stressing curriculum development study than did earlier, and presumably older, nursing graduates.

Year in which highest level of non-nursing education completed. Seven statistically significant mean differences in Alberta nurse educators' perceptions of importance of the 40 program characteristics according to year in which they graduated from their highest level of non-nursing education were demonstrated. These statistically significant mean differences are shown in Table 42.

The Scheffé test indicated a tendency for perceptions of importance of six of the seven statistically significant program

Table 41

Mean Differences in Perceptions of Importance of Program Characteristics by Year in Which Highest Level of Nursing Education Completed

Program Characteristics	Year				F Ratio
	Before 1968	1968-71	1972-75	After 1975	
1. Stresses use of instructional modules	3.32	3.29	3.32	3.35	0.01
2. Permits advanced student placement	3.74	3.62	3.58	3.67	0.31
3. Permits admission of non-nursing baccalaureate	3.15	2.17	1.91	2.00	0.68
4. Promotes accessibility of students to faculty	3.86	4.04	4.01	4.38	2.83*
5. Equal emphasis on clinical specialization and teaching	4.02	3.84	3.80	4.21	1.83
6. Provides for credit transferability	4.16	4.38	4.28	4.37	0.93
7. Stresses program individualization	4.12	4.47	4.43	4.37	2.16
8. Primary emphasis on teaching	3.38	3.34	3.49	3.39	0.24
9. Stresses behavioral objectives	3.71	3.69	3.48	3.88	1.44
10. Primary emphasis on clinical specialization	3.26	2.94	2.89	3.19	1.61
11. Promotes pass/fail grading	2.47	2.78	2.98	2.91	1.66
12. Prepares beginning researcher	3.24	3.37	3.54	3.67	1.68
13. Requires nursing practice experience for admission	4.26	4.01	4.26	4.29	1.13
14. Stresses study of nursing issues	3.92	3.98	4.06	4.15	0.54
15. Emphasizes physical sciences					

*Statistically significant at .05 level.

Table 41 (continued)

Program Characteristics	Year				
	Before 1968	1968-71	1972-75	After 1975	F Ratio
16. Stresses interdisciplinary classes	3.46	3.51	3.70	3.88	1.74
17. Promotes study of health care issues	3.28	3.54	3.47	3.56	0.82
18. Stresses curriculum development study	3.86	3.75	4.17	4.12	3.28*
19. Promotes study of health care issues	4.20	4.13	4.12	4.19	0.12
20. Encourages independent study	4.02	4.10	4.06	3.97	0.19
21. Requires completion of research study	3.34	3.30	3.28	3.19	0.09
22. Provides credit for work experience	3.49	3.45	3.80	3.54	1.65
23. Stresses academic counselling	3.30	3.52	3.73	3.46	1.94
24. Emphasizes learning about disadvantaged nursing student	2.89	2.89	2.95	2.76	0.27
25. Requires nursing education research	2.94	2.83	2.80	2.95	0.23
26. Stresses course and program counselling	3.47	3.72	3.53	3.66	0.72
27. Emphasizes humanities	3.64	3.47	3.30	3.67	2.39
28. Stresses change theory courses	4.02	4.00	4.12	4.16	0.46
29. Provides micro-teaching experience	3.84	3.50	3.85	3.79	1.81
30. Emphasizes learning about today's nursing student	3.60	3.58	3.57	3.51	0.07
31. Provides nontraditional clinical specialization	3.65	3.45	3.69	3.93	1.61
32. Distinguished by concentrated study in nursing	3.74	3.57	3.52	3.43	0.68

*Statistically significant at .05 level.

Table 41 (continued)

Program Characteristics	Year				F Ratio
	Before 1968	1968-71	1972-75	After 1975	
33. Requires clinical nursing research	3.08	2.64	2.91	2.88	1.23
34. Emphasizes learning about student teacher relationship	3.56	3.63	3.62	3.70	0.15
35. Emphasizes study of teaching/learning	3.92	4.00	3.83	3.88	0.41
36. Emphasizes social sciences	3.44	3.38	3.25	3.30	0.53
37. Prepares informed researcher consumer	3.77	3.54	3.73	3.86	0.91
38. Stresses follow-up of graduates	4.06	4.09	4.06	4.35	1.30
39. Stresses student counselling for personal problems	2.71	2.57	2.66	2.79	0.37
40. Integrates traditional clinical areas	3.30	3.07	3.30	2.95	1.40

*Statistically significant at .05 level.

Table 42

Mean Differences in Perceptions of Importance of Program Characteristics by Year in Which Highest Level of Non-Nursing Education Completed

Program Characteristics	Year					
	Before 1960	1960-63	1964-67	1968-71	After 1971	F Ratio
1. Stresses use of instructional modules	3.31	3.28	3.20	3.46	3.21	0.42
2. Permits advanced student placement	3.72	3.39	3.89	3.61	3.65	1.39
3. Permits admission of non-nursing baccalaureate	2.13	1.91	2.22	1.84	2.07	0.79
4. Promotes accessibility of students to faculty	3.81	4.11	4.29	4.21	3.90	2.61*
5. Equal emphasis on clinical specialization and teaching	3.95	3.78	4.07	3.98	3.76	0.64
6. Provides for credit transferability	4.03	4.33	4.55	4.39	4.31	3.31**
7. Stresses program individualization	4.09	4.58	4.60	4.25	4.38	3.74**
8. Primary emphasis on teaching	3.25	3.58	3.69	3.39	3.03	2.27
9. Stresses behavioral objectives	3.43	4.05	3.93	3.39	3.64	4.07**
10. Primary emphasis on clinical specialization	3.11	3.05	3.09	2.78	3.07	0.79
11. Promotes pass/fail grading	2.63	2.47	3.04	3.19	2.50	2.76*
12. Prepares beginning researcher	3.21	3.39	3.69	3.48	3.41	1.50
13. Requires nursing practice experience for admission	4.33	3.86	4.14	4.25	4.29	1.51

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 42 (continued)

Program Characteristics	Year					
	Before 1960	1960-63	1964-67	1968-71	After 1971	F Ratio
14. Stresses study of nursing issues	3.87	4.00	4.14	3.95	4.13	0.74
15. Emphasizes physical sciences	3.03	2.91	2.88	2.97	2.84	0.31
16. Stresses interdisciplinary classes	3.52	3.49	3.67	3.65	3.74	0.46
17. Promotes study of health care issues	3.35	3.46	3.84	3.38	3.19	2.47*
18. Stresses curriculum development study	3.87	3.84	4.21	4.02	3.90	1.24
19. Promotes study of health care issues	4.11	4.19	4.30	4.05	4.03	0.66
20. Encourages independent study	3.95	3.97	4.14	4.07	4.10	0.36
21. Requires completion of research study	3.34	2.97	3.49	2.85	3.52	2.18
22. Provides credit for work experience	3.42	3.59	3.77	3.62	3.43	0.98
23. Stresses academic counselling	3.29	3.49	3.91	3.42	3.52	2.66*
24. Emphasizes learning about disadvantaged nursing student	2.70	3.00	3.21	2.72	2.84	1.70
25. Requires nursing education research	2.70	3.05	3.17	2.85	2.64	1.53
26. Stresses course and program counselling	3.54	3.62	3.74	3.65	3.42	0.53
27. Emphasizes humanities	3.75	3.42	3.51	3.27	3.40	2.31
28. Stresses change theory courses	4.09	4.00	4.09	4.14	3.93	0.35

**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 42 (continued)

Program Characteristics	Year					F Ratio
	Before 1960	1960-63	1964-67	1968-71	After 1971	
29. Provides micro-teaching experience	3.68	3.79	3.75	3.81	3.60	0.28
30. Emphasizes learning about today's nursing student	3.44	3.71	3.82	3.52	3.30	1.86
31. Provides nontraditional clinical specialization	3.79	3.53	3.47	3.82	3.43	1.18
32. Distinguished by concentrated study in nursing	3.67	3.39	3.71	3.39	3.50	0.86
33. Requires clinical nursing research	3.18	2.63	2.55	2.91	2.70	2.21
34. Emphasizes learning about student teacher relationship	3.66	3.58	3.78	3.57	3.57	0.44
35. Emphasizes study of teaching/learning	3.95	3.87	4.11	3.86	3.70	1.14
36. Emphasizes social sciences	3.55	3.37	3.35	3.18	3.07	1.99
37. Prepares informed research consumer	3.79	3.46	3.71	3.50	4.07	1.92
38. Stresses follow-up of graduates	3.97	4.13	4.35	4.16	4.00	1.57
39. Stresses student counselling for personal problems	2.68	2.74	2.87	2.77	2.30	1.29
40. Integrates traditional clinical areas	3.22	3.00	3.27	3.16	3.23	0.40

**Statistically significant at .01 level.
*Statistically significant at .05 level.

characteristics to vary directly with year in which highest level of non-nursing education was completed, to peak at the years 1964 to 1967, and then begin to vary indirectly with year in which highest level of non-nursing education was completed. The program characteristics affected in this fashion were: promoting accessibility of students to faculty; providing for credit transferability; stressing program individualization; stressing behavioral objectives; promoting study of the post-secondary system; and stressing academic counselling. Since almost three-quarters of the respondents reported high school as their highest level of non-nursing education, the majority of those who completed their highest level of non-nursing education between 1964 and 1967 probably graduated from high school during those years. The Scheffé test was unable to determine between which groups of nurse educators grouped according to year in which highest level of non-nursing education was completed the statistically significant mean difference in perceptions of importance of the program characteristic of promoting pass/fail grading existed.

Geographic location of nursing education. Nine statistically significant mean differences in respondents' perceptions of importance of the 40 program goals according to the geographic location of their nursing education were demonstrated. Table 43 shows these statistically significant mean differences.

Respondents whose nursing education had been taken in more than one province or country ascribed greater importance than did those whose nursing education had been taken in only one province or country, for the following program characteristics: requires

Table 43

Mean Differences in Perceptions of Importance of Program Characteristics by Geographic Location of Nursing Education

Program Characteristics	One Province or Country	More than One Province or Country	T Value
1. Stresses use of instructional modules	3.33	3.28	0.28
2. Permits advanced student placement	3.61	3.71	-0.79
3. Permits admission of non-nursing baccalaureate	2.08	2.01	0.41
4. Promotes accessibility of students to faculty	4.03	4.10	-0.62
5. Equal emphasis on clinical specialization and teaching	3.83	4.13	-2.13*
6. Provides for credit transferability	4.33	4.22	1.02
7. Stresses program individualization	4.37	4.32	0.43
8. Primary emphasis on teaching	3.51	3.19	2.10*
9. Stresses behavioral objectives	3.68	3.64	0.25
10. Primary emphasis on clinical specialization	2.93	3.27	-2.34*
11. Promotes pass/fail grading	2.79	2.81	-0.09
12. Prepares beginning researcher	3.44	3.45	-0.10
13. Requires nursing practice experience for admission	4.10	4.35	-1.87
14. Stresses study of nursing issues	3.95	4 14	-1.50

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 43 (continued)

Program Characteristics	One Province or Country	More than One Province or Country	T Value
15. Emphasizes physical sciences	2.85	3.18	-2.65**
16. Stresses interdisciplinary classes	3.62	3.62	0.00
17. Promotes study of health care issues	3.53	3.33	1.51
18. Stresses curriculum development study	3.95	3.97	-0.17
19. Promotes study of health care issues	4.14	4.18	-0.40
20. Encourages independent study	4.05	4.03	0.22
21. Requires completion of research study	3.11	3.60	-2.69**
22. Provides credit for work experience	3.61	3.50	0.73
23. Stresses academic counselling	3.47	3.62	-1.08
24. Emphasizes learning about disadvantaged nursing student	2.94	2.77	1.10
25. Requires nursing education research	2.92	2.78	0.86
26. Stresses course and program counselling	3.62	3.55	0.51
27. Emphasizes humanities	3.40	3.68	-2.42*
28. Stresses change theory courses	4.09	4.02	0.52
29. Provides micro-teaching experience	3.73	3.73	-0.03
30. Emphasizes learning about today's nursing student	3.58	3.54	0.33

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

Table 43 (continued)

Program Characteristics	One Province or Country	More than One Province or Country	T Value
31. Provides nontraditional clinical specialization	3.53	3.90	-2.36*
32. Distinguished by concentrated study in nursing	3.40	3.90	-3.34***
33. Requires clinical nursing research	2.75	3.08	-1.88
34. Emphasizes learning about student teacher relationship	3.63	3.61	0.16
35. Emphasizes study of teaching/learning	3.85	4.01	-1.32
36. Emphasizes social sciences	3.29	3.45	-1.34
37. Prepares informed research consumer	3.57	3.95	-2.59**
38. Stresses follow-up of graduates	4.09	4.18	-0.79
39. Stresses student counselling for personal problems	2.60	2.81	-1.36
40. Integrates traditional clinical areas	3.22	3.06	1.06

***Statistically significant at .001 level.
**Statistically significant at .01 level.
*Statistically significant at .05 level.

completion of research study; equal emphasis on clinical specialization and teaching; primary emphasis on clinical specialization; emphasizes physical sciences; emphasizes humanities; provides for nontraditional clinical specialization; distinguished by concentrated study in nursing; and preparing informed research consumer. In comparison, the Scheffé test showed that respondents whose nursing education had been taken in only one province or country ascribed greater importance to the program characteristic of primary emphasis on teaching. Since the majority of respondents who had received their nursing education in only one province or country were probably those who had been prepared exclusively in Alberta, it may be that these nurse educators perceived a need for primary emphasis on teaching in a master's in nursing program.

Summary of Mean Differences in Perceptions of Program Characteristics

To identify the program characteristics about which Alberta nurse educators most often differed in their perceptions of importance for a special purpose master's in nursing program for Alberta nurse educators, a frequency distribution of statistically significant mean differences in perceptions of importance of the 40 program characteristics was constructed. Table 44 represents this distribution. Only 89, or 13% of 680 possible statistically significant mean differences in perceptions of importance of program goals were demonstrated.

The program characteristic about which Alberta nurse educators differed most often was a program distinguished by concentrated study in nursing. Insofar as respondents were considering characteristics of a master's in nursing program, possibly the assumption had been made that concentrated study in nursing would be incorporated into

Table 44

Frequency Distribution of Statistically Significant Mean Differences in Perceptions of Importance of Program Characteristics

Program Characteristics	Frequency
Distinguished by concentrated study in nursing	6
Requires nursing practice experience for admission	5
Requires completion of research project	5
Emphasizes humanities	5
Provides nontraditional clinical specialization	5
Requires clinical nursing research	5
Provides for credit transferability	4
Primary emphasis on teaching	4
Promotes pass/fail grading	4
Promotes study of post-secondary system	4
Equal emphasis on clinical specialization and teaching	3
Stresses program individualization	3
Stresses behavioral objectives	3
Primary emphasis on clinical specialization	3
Provides credit for work experience	3
Prepares informed research consumer	3
Permits admission of non-nursing baccalaureates	2
Promotes accessibility of students to faculty	2
Emphasizes physical sciences	2
Stresses curriculum development study	2
Encourages independent study	2
Emphasizes learning abour disadvantaged nursing student	2
Stresses student counselling for personal problems	2
Stresses use of instructional modules	1
Permits advanced student placement	1
Prepares beginning researcher	1
Stresses study of nursing issues	1
Stresses interdisciplinary classes	1
Promotes study of health care issues	1
Stresses academic counselling	1
Requires nursing education research	1
Emphasizes social sciences	1
Integrates traditional clinical areas	1
Total	89

the program, or possibly respondents may not have been clear in their own minds concerning the degree of nursing emphasis desirable in such a program. Five other program characteristics promoted almost as many differing perceptions of importance as did a program distinguished by concentrated study in nursing. They were: requiring nursing practice experience for admission; requiring completion of a research study; emphasizing the humanities; providing nontraditional clinical specialization; and requiring clinical nursing research.

For seven of the 40 program characteristics, Alberta nurse educators expressed no statistically significant mean differences in perceptions of importance: stressing follow-up of graduates; stressing change theory courses; emphasizing study of teaching/learning; providing micro-teaching experience; emphasizing learning about student teacher relationships; stressing course and program counselling; and emphasizing learning about today's nursing student. Alberta nurse educators, as a group, perceived these program characteristics as highly important for a special purpose master's in nursing program for Alberta nurse educators.

To summarize respondent personal and professional characteristics most often associated with statistically significant mean differences in Alberta nurse educators' perceptions of importance of the 40 program characteristics, a frequency distribution was constructed. Table 45 shows the frequency distribution of personal and professional characteristics associated with statistically significant mean differences in perceptions of importance of program characteristics.

Table 45

Frequency Distribution of Personal and Professional Characteristics Associated with Statistically Significant Mean Differences in Perceptions of Importance of 40 Program Characteristics

Personal and Professional Characteristics	Frequency
Highest level of nursing education	12
Nature of employing program	10
Geographic location of nursing education	9
Age	8
Years of non-teaching nursing work experience	8
Year in which highest level of non-nursing education completed	7
Years of teaching experience in nursing	6
Nature of initial nursing preparation	5
Percentage of workload directly related to teaching function	5
Instructional setting	5
Focus of baccalaureate in nursing preparation	4
Highest level of non-nursing education	3
Type of employment	2
Geographic location of employment	2
Year in which highest level of nursing education completed	2
Administrative position	1
Total	89

The personal and professional characteristic of Alberta nurse educators which was most frequently associated with statistically significant mean differences in the perceived importance of the 40 program characteristics was highest level of nursing education. For 11 of the 12 statistically significant mean differences associated with highest level of nursing education, the Alberta nurse educators with master's degrees perceived the importance of program characteristics differently than did either respondents with baccalaureate degrees and/or respondents with diplomas, suggesting that the nurse educators who might be involved in planning master's in nursing programs (master's prepared respondents) perceived program characteristics differently than nurse educators who might be enrolling in a special purpose master's in nursing program for Alberta nurse educators (baccalaureate prepared respondents). Each of the Alberta nurse educators' personal and professional characteristics examined was associated with at least one statistically significant mean difference in perceptions of importance of the 40 program characteristics.

COMMENTS ON THE STUDY

Respondents were invited to offer comments concerning a special purpose master's in nursing program for Alberta nurse educators in the final section of the questionnaire. Eighty-six, or 37% of the respondents, chose to offer a total of 129 comments. The large proportion of respondents who offered comments and the great number of comments offered were taken as indications of the interest Alberta

nurse educators had in the topic of master's level education in nursing.

The 129 comments were categorized according to the following framework:

1. Reactions to the instrument.
2. Expressed interest in participating in a special purpose master's in nursing program.
3. Perceived facilitators and barriers to participation.
4. Goals of a special purpose master's in nursing program.
5. Characteristics of a special purpose master's in nursing program.
6. Miscellaneous.

Table 46 shows the frequency and percentage of responses in each category. The largest number of comments concerned characteristics of a special purpose master's in nursing program. Expressed interest in participating in such a program involved the next greatest number of comments, and the least number of comments offered involved goals of such a progrm. This was taken as another indication of the agreement among Alberta nurse educators concerning the goals of a special purpose master's in nursing program for Alberta nurse educators.

The following discussion includes a sample of comments from each category with comments chosen for inclusion representing major and contrasting concerns. Comments have been reproduced as originally written, although in some cases only excerpts have been taken from lengthy comments.

Table 46

Frequency and Percentage Distribution of Questionnaire Comments by Major Categories

Category	Frequency	Percentage
1. Reactions to the instrument	16	12.4
2. Expressed interest in participating in a special purpose master's in nursing program	28	21.7
3. Perceived facilitators and barriers to participation	16	12.4
4. Goals of a special purpose master's in nursing program	5	3.9
5. Characteristics of a special purpose master's in nursing program	51	39.5
6. Miscellaneous	13	10.1
	129	100%

Reactions to the Instrument

Although not specifically requested, a number of respondents offered comments and reactions to the survey instrument. Most comments in this category expressed the belief that the term "special purpose master's in nursing program" was too vague to be useful, even though the transmittal letter accompanying the questionnaire had defined the term as "describing a first level graduate degree program focusing on nursing and the teaching of nursing."

> A "special purpose" master's program is somewhat vague--of necessity at this point--in your research.
>
> What is a first level graduate degree program?
>
> The word "expert" concerns me. Is there ever such a person?
>
> I had difficulty filling in Parts B and C. What is your definition of emphasis? Does this mean major stress? or does it merely imply that it is an important area?
>
> You describe this as a masters program focusing on nursing and nursing education but your questions seem to focus on the nursing education component. This may be because this questionnaire is directed at nursing educators.
>
> I am appalled that there is no reference to FACULTY or RESEARCH ACTIVITY/REPUTATION of the faculty/department etc. involved. Historically grad. stu. in arts, sc. humanities etc. have selected grad. programs very much on the basis of that specific people/ faculty are teaching in what(ever) university. Secondly, the related point: We cannot have viable grad programs (in anything) without a fundamental cornerstone of research in that field, going on in those universities with grad. programs even if the grad. programs are prof'l degrees rather than academic. Your questionnaire does not reflect this "operating condition" at all.
>
> I am very much in favour of making a master's in nursing more readily attainable to the nurses in Alberta and in fact would very much have liked to respond to those questions directed to this area but by following your directions, could not.
>
> Obviously many of the characteristics would be a "must" in any program for nurse educators. Was not so sure about the nursing component, whether it would have a specialist or generalist focus

and how this might articulate with the education courses. The terminology reflected a medical model rather than a nursing model and this should be carefully considered before any Special Purpose program is introduced. On the whole the questions were clear and well set-up.

Excellent questionnaire - very well designed
- enjoyable to answer.

Expressed Interest in Participating in a Special Purpose Master's in Nursing Program

The majority of comments relating to this category were affirmative and some were overly supportive, emphasizing respondents' previously expressed interest in a special purpose master's in nursing program for Alberta nurse educators. Some concern was expressed that nurse educators should have master's level preparation in nursing in preference to other disciplines.

A joint masters in education-nursing is long overdue. At present we have sound clinical nurses who know nothing about education--or educators who know next to nothing about nursing--the result is chaos.

I believe there is a great need for well prepared nurse educators in the province of Alberta. At the moment there is an alarming dearth facing those administering nursing education programs to develop an "on the job" program which results in one-to-one tutoring, in many cases. This situation cannot help but affect the calibre of nursing education.

A special purpose masters in nursing program for Alberta nurse educators is LONG OVERDUE! Existing master's programs in nursing do not come anywhere close to meeting the needs of nurse educators.

I would think that a program specifically aimed at nurse educators should be developed and offered in collaboration with experts in the area of Education particularly Adult Education. This would seem to me to be more important than interdisciplinary studies with medical practitioners.

Nurses studying at Faculty of Educ. do not have library resources pertaining to nursing usually do not promote a research, do not get knowledge from nurse educators so unaware of curriculum bldg. in nursing and the issues at stake.

> In response to question D-1 & 2: After several years of serious consideration of the current state of nursing education and the direction nursing education and service are going I am unable to recommend advanced education beyond this level for nurse--far from it! Education at the Master or doctoral level should be in a field that is broader and more academically rewarding than "nursing". This type of education, in order to produce educated and academically "powerful" graduates who could give leadership and gain respected recognition of others to nursing, must, I suggest, be educated as generalists away from the narrow confines of nursing. If nursing is to reach a state of being a profession that is recognized as such by people other than nurses, I feel we must so proceed. A master of nursing is but "guilding thelily"--I do not believe that nursing has master level material inherent in its field.

Perceived Facilitators and Barriers to Participation

As facilitators to participation in a special purpose master's in nursing program, respondents most often commented on part-time study. The most frequent comments concerning barriers to participation concerned cost of graduate level education, which served to reinforce the earlier finding that Alberta nurse educators identified lack of financial assistance as the single most likely barrier to their participation in a special purpose master's in nursing program.

> The availability of part time courses for the person with family responsibilities as well as responsibilities in maintaining at least partial salary would solve many nurses problems in obtaining this type of education which many of us seriously need.

> Offer some courses in other major centres.

> I am a single parent whose goal is to complete a Master's in Nursing. Financially, it appears impossible, to reach this goal in the forseeable future.

Goals of a Special Purpose Master's in Nursing Program

Of the five comments dealing with this category, two concerned the need for leadership in nursing. Providing a foundation for doctoral study, preparing expert nurse clinicians and enhancing nurse educators' teaching were the focus of the remaining three comments.

> Nurses graduating with a special purpose master's in nursing could be placed in senior positions. They will be expected not only to have skills in curriculum development and act as advisors for course development, but also to have administrative skills required for implementing new curricula and hiring and evaluating faculty performance.

> My answer to Part B, ques. #1 (importance for special purpose master's to provide foundation for doctoral study) is an indication that, for the majority of nurses prepared for a master's degree the program must be viewed as terminal in itself.

> I think that we need more clinical programs since we can now get education courses from education and resources are limited so we cannot do both.

> I feel a program designed to help nurse educators increase their teaching skills would benefit the nursing profession in general.

Characteristics of a Special Purpose Master's in Nursing Program

The majority of comments in this category tended to cluster about program characteristics concerning clinical and/or teaching emphasis, research component, time frame and flexibility and program individualization. A variety of opinions were presented.

> Whether or not I've made it clear I have a major concern regarding the need for clinically competent nurse-educators. I think that there must be a strong clinical plus component.

> Individuals who teach nursing are often very well prepared clinically and that is always a requirement for a teacher, to know his/her area well, but these individuals are rarely prepared as educators. A solid knowledge of educational

theory i.e. teaching/learning principles, principles and practices of curriculum development and revision, and methods of educational research is essential if nursing education is to continue to prepare a product that meets the needs of the employer and the consumer.

I believe that nursing education needs people who are expert in nursing practice. Specialization in education & administration should be post-masters or beyond.

I see masters level preparation leading to specialized practitioners with a research focus derived from N+1 or single subject experimental designs. I see doctoral study leading to theory building and service delivery improvement with a group comparison research design focus.

I also feel very strongly that research should not be one of the main components of the program--I would like to be able to use research project results so I could alter my practice as deemed necessary, and to know how to use research people who have research as their specialized area. I realize that research in nursing is going to help improve practice, but I do not feel that I as a nurse educator need to know all the inner workings for research projects--there are experts in this field whom I could learn to utilize.

I feel that research is a very significant component at this level of preparation and can see that study could be done in either education or a clinical specialty.

I do not believe a masters program in nursing should have the option of a non-thesis route (this route should have a project requirement) for those who are not interested in pursuing a Ph.D. or do not have a high interest in research.

Flexibility in requirements for completion--Would not see a thesis as the only means of assessment of completion.

Practical work situation projects that would assist an institution, sound much more sensible than trivial belabouring of the thesis that is currently required.

Perhaps a choice between thesis course and/or more courses for credit.

Every one of the characteristics designated could be viewed as highly important in and of itself. However, one must prioritize--even more stringently (in term of time) if a one-year Masters Program as opposed to a 2-year program, is envisaged.

It is important that a program provide the opportunity to enhance teaching skills but also to enhance nursing skills.

In order to do this, the program would probably need to be two years in length.

Also, allow the specialization of one or more areas within the above mentioned (10-12 months) time.

Should be more self-directed study on topics of interest.

Weekend modules that would be open to any R.N. but would be part of a comprehensive curriculum for the degree candidate would be a good way to increase nursing performance.

Feel that the self-directed learning focus (contractual learning) should be the focus, with centres such as . . . acting in the capacity of satellite to the programs of interest outside the Alberta scene.

I feel strongly that a student, particularly a mature student, who has demonstrated the ability to take responsibility, and a lifetime commitment to nursing, should be able to have such educational counselling and courses available, to enable him/her to "tailer" a programme to his/her needs, whether clinical expertise, or research, for example is his/her goal.

Should hope there would be courses related to the educ. systems e.g. university, college differences--values--philosophy of educ.

Would draw heavily on the field of instructional psychology.

I am not sure that the admission of students with advanced preparation outside nursing, into nursing master's programmes, is not wasted effort by their Nurse Educators; in view of what I believe is a high attrition rate in these students.

Re Part C, items 3 & 13 - I feel that it is very important that the student have practical experience in the field of previous education. However, I do not necessarily feel that the requirements should be that of practice in nursing.

Certainly there are other areas of clinical specialty required.

I feel that we need to do more research on how to help others change their behaviour.

Many nurses are finding themselves in positions of developing continuing education programs for nurses, other health professionals and the general public. I would hope a special purpose master's degree would offer courses appropriate to this group. Perhaps there could be several routes the student could choose, depending on his/her area of focus--basic nsg. education, continuing nursing education, general health education, etc.

The requirements need to be more stressful than those of other program masters program. Th rigid and stressful constraints presently imposed by the only MN program . . . are a definite deterent to my registration.

Increased interaction with students in other faculties needed so that input other than nursing is available. Since this has a nursing focus we would want to prevent the program from becoming too insular.

One thing not mentioned is the quality of teaching staff in such a program--this would be an important factor for me personally and I think nurses need the opportunity of broadening their total horizons while enhancing and enriching nursing expertise.

I would see the need for highly qualified and flexible instructional staff.

Miscellaneous

Thirteen comments related to concerns other than those focused upon topics covered in the previous categories were offered. They were as follows:

I'm in the midst of leaving nursing entirely. I've spent 11 years in the field in both service and education. At this time, I find that the nsg. members don't treat each other as individuals which creates difficulties in working where individuals of thought, creativity, etc. are censored or ignored.

As an "old" B.Sc. nurse (5 years) we were prepared for teaching or public health when we left university. We did receive excellent teaching (or instruction) then--this becomes more apparent as I go on in work and in study. . . . We are basically turning out nurses (both B.Sc. and diploma) who are not adequately prepared to take on either teaching or ward responsibilities.

Reference Part C #3: My combined education background (R.N., B.A. Psychology, B.A. Education) is a valuable combination.

Nurse educators need to become more critical consumers of educational "research" materials: We seem to sway with every trend without first determining if what we are doing is satisfactory. It is the phenomenon of change for change sake. A base in curriculum development is a must as is an understanding of historical and present trends.

I am very interested in this program and look forward to receiving your summary findings.

There is a need at this point in time but this type of preparation should ideally be at the doctoral level.

Those who have Master's in Non-Nursing (but related fields) what happens to them?

Very good idea for research project.

Good luck! Nursing has some very intelligent ambitious people. Can you get anyone to listen to your needs?

Good luck with your thesis and I sincerely hope it has some impact on graduate nurse programing.

Thanks for the opportunity. How does this type of program fit into education faculty's work with post-secondary instructors?

Calgary desperately needs a Master's of Nursing programme but not, not what is being developed at this time. . . . Please try to give us the quality we desire rather than the compromise that will be offered.

The creation of specialists for positions such as nurse-practitioner has resulted in an unfortunate responses from the medical profession. Research oriented programs are available in Alberta which includes students of an extreme variety of backgrounds. Nsg. education can be adapted to this program. I tend to be very wary of new programs.

SUMMARY

This chapter has presented a description and analysis of the data gathered from the questionnaire responses. Frequency and percentage distributions were presented and discussed to describe the personal and professional characteristics of the Alberta nurse educators and their interest in participating in a special purpose master's in nursing program for Alberta nurse educators.

Reasons for lack of interest in participating in a special purpose master's in nursing program for Alberta nurse educators were summarized and were analyzed by rank ordering the response frequencies. Rank ordering of response frequencies was also used to identify common

facilitators and barriers to nurse educators' participation in such a program.

Response means, standard deviations and mean ranks were used to identify and describe goals and characteristics assessed by respondents as being important to a special purpose master's in nursing program.

T and F tests were used to determine statistically significant mean differences among Alberta nurse educators, grouped according to personal and professional characteristics, in their perceptions of the importance of goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators. The Scheffé test was used as an a posteriori contrast for statistically significant F tests to determine between which of the respondents, grouped according to personal and professional characteristics, the statistically significant mean differences in perceptions of importance of program goals and characteristics existed.

Frequency and percentage distributions of statistically significant mean differences among the respondents' perceptions of importance of goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators were presented and discussed to describe the program goals and characteristics about which respondents differed most frequently, and to describe the personal and professional characteristics of the Alberta nurse educators most frequently associated with differences in their perceptions of the importance of the 16 program goals and 40 program characteristics.

Respondents' comments concerning the study were categorized and described by frequency and percentage distributions. A sample of comments representing major and contrasting concerns in each category were presented and discussed.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND IMPLICATIONS

A summarization of the study, conclusions derived from the study and implications for program planners and for further research, are included in this chapter. The initial section of the chapter provides a summarization of the study, including its purpose, methodology, data analyses and findings. The second section presents conclusions derived from the findings. The third section presents implications as these might apply to both program planners and further research.

SUMMARY

Purpose

The purpose of this study was to provide data germane to the planning of master's level programs in nursing, in Alberta, through examining personal and professional characteristics of Alberta nurse educators, their interest in participating in a special purpose master's in nursing program for Alberta nurse educators, their perceptions of goals which should be addressed, and the operational characteristics of such a program.

Subproblems

The following subproblems were addressed in this study:

1. What are the personal and professional characteristics of the nurse educators in Alberta?

2. What is the extent of interest among Alberta nurse educators in pursuing a special purpose master's in nursing program designed for Alberta nurse educators?

3. What do Alberta nurse educators perceive as potential facilitators and barriers to their participation in a special purpose master's in nursing program.

4. What should be the goals of a special purpose master's in nursing program as perceived by Alberta nurse educators?

5. What descriptive program characteristics are perceived by Alberta nurse educators as being important for a special purpose master's in nursing program.

6. Are there any statistically significant mean differences among Alberta nurse educators in their perceptions of the importance of possible goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators?

Methodology

Data were collected using a questionnaire survey. The instrument was developed by the investigator and was comprised of five sections related to: (1) personal and professional characteristics of the respondents; (2) expressed interest in pursuing a special purpose master's in nursing program for Alberta nurse educators; (3) perceptions of the importance of 16 goals of a special purpose master's in nursing program; (4) perceptions of the importance of 40 characteristics of a special purpose master's in nursing program; and (5) any additional comments concerning a special purpose master's in nursing program for Alberta nurse educators.

The questionnaire was distributed to the population of nurse educators involved in Alberta practical, diploma, baccalaureate and master's nursing programs, and to a selected sample of 31 nurse educators employed in Alberta health care agency inservice programs.

Data Analyses

Frequency and percentage distributions were used to describe the personal and professional characteristics of the Alberta nurse educators and to assess their interest in participating in a special purpose master's in nursing program for Alberta nurse educators. Reasons for lack of interest in such a program were summarized and analyzed by rank ordering the frequency of responses.

Rank ordering of response frequencies was also used to identify some potential facilitators and barriers to Alberta nurse educators' participation in a special purpose master's in nursing program.

Response means, standard deviations and mean ranks were used to identify and describe program goals and characteristics assessed by Alberta nurse educators as important to a special purpose master's in nursing program for Alberta nurse educators.

T and F tests were used to determine statistically significant mean differences among Alberta nurse educators, grouped according to personal and professional characteristics, in their perceptions of the importance of goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators. The Scheffé test was used as an a posteriori contrast for statistically significant F tests to determine between which of the Alberta nurse educators,

grouped according to personal and professional characteristics, the statistically significant mean differences in perceptions of importance of goals and characteristics existed.

Findings

Personal and professional characteristics of Alberta nurse educators. One-half of all the respondents were between the ages of 25 and 34 years and 97% of the Alberta nurse educators were female, making this a predominantly young and female educator force. The largest proportion of nurse educators reported that they had been teaching in nursing education for from one to four years and slightly more than one-half of the respondents reported from one to four years of non-teaching nursing work experience.

The largest proportion of respondents were involved in hospital based diploma nursing programs, with the next largest proportion involved in college based diploma programs and the baccalaureate degree programs, respectively. Of the 47 Alberta nurse educators who reported that they held administrative positions, two-thirds were at the co-ordinator level. Three-quarters of the nurse educators reported that they were employed in full-time, permanent positions.

Slightly more than one-half of the nurse educators reported that 76 to 100% of their workload was directly related to their teaching function. The largest proportion of respondents, almost one-half, taught equally in clinical and classroom settings, although one-third reported that they taught mainly in the clinical setting. Two-thirds of the Alberta nurse educators were employed in Edmonton, slightly less than one-quarter were employed in Calgary and the

remaining approximately 10% were employed elsewhere in Alberta.

Almost three-quarters of the Alberta nurse educators reported a baccalaureate degree as their highest level of completed nursing education and only approximately 15% reported that they possessed a master's degree in nursing. Fifteen percent of the Alberta nurse educators also reported a diploma in nursing as their highest level of nursing education.

Approximately 80%, the largest proportion, of Alberta nurse educators reported high school as their highest level of non-nursing education.

Three-quarters of the nurse educators reported a hospital based diploma nursing program as their initial nursing preparation and almost all of the remaining one-quarter reported initial nursing preparation had taken place in a baccalaureate degree program.

An almost equal proportion of Alberta nurse educators possessing baccalaureate degrees in nursing reported a generalized focus for their program of study as reported a specialized program focusing on preparation for teaching and supervision. Together, these two foci accounted for slightly less than three-quarters of the Alberta nurse educators possessing baccalaureate in nursing preparation.

Slightly more than one-quarter of the 32 Alberta nurse educators possessing master's degrees in nursing reported the focus of their program as preparation for clinical specialization, while one-sixth reported a program focusing on both clinical specialization and preparation for teaching. Only 6% reported that their master's

in nursing program had focused on preparation for teaching, solely.

An almost equal proportion of 30% each of the nurse educators, reported that they had completed their highest level of nursing education between 1968 and 1971, and between 1972 and 1975. The next largest proportion of slightly more than 20%, achieved their highest level of nursing education in 1976 or later.

The largest proportion of Alberta nurse educators reported that they had completed their highest level of non-nursing education prior to 1960, although the next largest proportions of 20% each had completed their highest level of non-nursing education between 1964 and 1967, and between 1968 and 1971, respectively.

The largest proportion of nurse educators--slightly more than two-thirds--received at least some of their nursing education in Alberta. Fifteen percent of nurse educators reported that some of their nursing education had been taken in the United States and an almost equal proportion reported some nursing education had been taken in Ontario, Quebec and Saskatchewan, respectively. The 5.5% of nurse educators reporting "other" for geographic location of nursing preparation were comprised almost entirely of respondents who had received some nursing education in the United Kingdom. Of the Alberta nurse educators possessing master's degrees in nursing, slightly more than 80% reported that their degrees had been conferred in the United States.

Interest in a special purpose master's in nursing program. One hundred and thirty-five Alberta nurse educators, or 57.7% of the respondents, expressed interest in the possibility of undertaking a

special purpose master's in nursing program for Alberta nurse educators. Ninety-nine, or 42.3% of the respondents, expressed no interest in the possibility of undertaking such a program. Possession by the nurse educator of a master's degree was the most frequently expressed reason for lack of interest among respondents in undertaking a special purpose master's in nursing program. Family responsibilities and reasons classified as "other" tied as second and third ranked reasons for lack of interest, but were well behind the first ranked reason.

Facilitators and barriers to participation. Alberta nurse educators who had expressed interest in the possibility of undertaking a special purpose master's in nursing program for Alberta nurse educators, ranked university campus setting as the most likely inducement to participation and placed it well ahead of the two next (tied) ranked inducements of basic government grants and loans and Edmonton. Mixed full- and part-time classes, evening classes and permission to attend classes while still on the job, were ranked fourth, fifth and sixth, respectively, as inducements to participation and were very similar in frequency of response.

Alberta nurse educators who had expressed interest in the possibility, sometime in the future, of undertaking a special purpose master's in nursing program, identified lack of financial assistance as the most likely barrier to their participation. Family responsibilities were identified as the second most likely barrier to participation and, by frequency of response, this barrier scored well behind lack of financial assistance but well ahead of the third and fourth most likely barriers of thesis requirement of program and loss

of present position. The third and fourth ranked barriers had almost identical scores by frequency of response.

Goals of a special purpose master's in nursing program. Of the 16 specified goals of a special purpose master's in nursing program, Alberta nurse educators identified improving the quality of nursing education as the most important. Preparing nursing education leaders and improving nursing practice were ranked a close second and third in importance as goals, respectively.

Characteristics of a special purpose master's in nursing program. Of the 40 specified program characteristics of a special purpose master's in nursing program, Alberta nurse educators identified stressing program individualization as the most important. Providing for credit transferability was ranked second and requiring nursing practice experience for admission was ranked third. The program characteristics which Alberta nurse educators ranked fourth and fifth, respectively, were promoting the study of health care issues and stressing follow-up of program graduates.

Mean differences in perceptions of importance of program goals. Only 7% of the possible statistically significant mean differences in perceptions of importance of program goals were demonstrated. The program goals about which Alberta nurse educators most often differed in their perceptions of importance for a special purpose master's in nursing program for Alberta nurse educators were providing a foundation for doctoral study, satisfying desire for intellectual stimulation and growth and advancing nursing as a profession. No

statistically significant mean differences were identified in perceptions of importance of five of the 16 specified program goals: preparing expert nurse clinicians; preparing nursing education leaders; improving quality of nursing education; enhancing opportunities for advancement; and increasing monetary reward.

The personal and professional characteristic of Alberta nurse educators which was most frequently associated with statistically significant mean differences in their perceptions of importance of the 16 program goals was instructional setting. Four of the personal and professional characteristics were not associated with statistically significant mean differences in perceptions of importance of the 16 program goals: year in which highest level of nursing education was completed; focus of baccalaureate in nursing preparation; percentage of workload directly related to teaching function; and geographic location of employment.

Mean differences in perceptions of importance of program characteristics. Only 13% of the possible statistically significant mean differences in perceptions of importance of program characteristics were demonstrated. The program characteristic about which Alberta nurse educators most often differed in their perceptions of importance for a special purpose master's in nursing program for Alberta nurse educators was a program distinguished by concentrated study in nursing. Five other program characteristics showed statistically significant mean differences by personal and professional characteristics almost as frequently. They were: requiring nursing practice experience for admission; requiring completion of a research

study; emphasizing the humanities; providing for nontraditional clinical specialization; and requiring clinical nursing research. No statistically significant mean differences were identified in perceptions of importance of eight of the 40 specified program characteristics: stressing follow-up of graduates; stressing change theory courses; emphasizing study of teaching/learning; providing micro-teaching experience; emphasizing learning about student teacher relationships; stressing course and program counselling; emphasizing learning about today's nursing student; and integrating traditional clinical areas.

The personal and professional characteristic of Alberta nurse educators which most frequently associated with statistically significant mean differences in their perceptions of the importance of the 40 specified program characteristics was highest level of nursing education. Each of the Alberta nurse educators' personal and professional characteristics examined was associated with at least one statistically significant mean difference in their perceptions of importance of the 40 specified program characteristics.

CONCLUSIONS

The following conclusions were based on the findings of the study:

1. Alberta nurse educators expressed sufficient interest in participating in a special purpose master's in nursing program for Alberta nurse educators to warrant further examination of the feasibility of offering such a program in Alberta.

2. Alberta nurse educators were constrained in their geographic mobility.

3. Financial constraints represented a major problem for Alberta nurse educators wishing to pursue a special purpose master's in nursing program for Alberta nurse educators.

4. Alberta nurse educators' personal and professional characteristics had little impact upon their perceptions of the importance of program goals and characteristics of a special purpose master's in nursing program for Alberta nurse educators.

5. Alberta nurse educators were generally in agreement concerning the importance of the 16 specified goals of a special purpose master's in nursing program. They were, however, uncertain whether a special purpose master's in nursing program for Alberta nurse educators should represent a terminal program or a step in the progression to doctoral study, and whether master's level study in nursing should most benefit students or the nursing profession.

6. Alberta nurse educators were generally in agreement concerning the importance of the 40 specified program characteristics, although they were uncertain about the degree of nursing emphasis that should be integral to a special purpose master's in nursing program for Alberta nurse educators.

7. Alberta nurse educators perceived that admission to a special purpose master's in nursing program for Alberta nurse educators should be restricted to nurses possessing baccalaureate degree preparation in nursing and some nursing practice experience.

8. Alberta nurse educators perceived that a special purpose

master's in nursing program for Alberta nurse educators should emphasize equally clinical specialization and preparation for the teaching role.

9. Alberta nurse educators perceived that the research component of a special purpose master's in nursing program for Alberta nurse educators should prepare an informed consumer of research and that completion of a thesis need not be a requirement for graduation.

10. Alberta nurse educators most likely to be involved in planning master's level education in nursing in Alberta (nurse educators with master's and doctoral degrees in nursing) perceived the characteristics of a special purpose master's in nursing program differently than some of the potential students (nurse educators with baccalaureate degrees in nursing).

IMPLICATIONS

The data provided by this investigation resulted in some significant findings which have importance for the planning of master's level education in Alberta and for further research.

Implications for Program Planners

Findings of this study which have relevance for master's in nursing program planners in Alberta are contained in the section of the chapter dealing with conclusions. The findings indicate a need to examine the feasibility of offering in Alberta master's level education in nursing which incorporates preparation for the functional role of teaching in nursing. Insofar as two-thirds of the study

respondents are employed in Edmonton, it may be advantageous to explore the possibility of extending the existing master's in nursing program to incorporate preparation for the role of nurse educator. Information relative to existing human, financial and physical resources could be a part of such a feasibility study, as could information concerning present and projected nurse educator manpower needs in educational programs and health care agencies.

The findings indicate that Alberta nurse educators are constrained in their geographic mobility, suggesting that if a master's in nursing program with a major in teaching were offered in Edmonton, provision for offering some courses in Calgary, and possibly Lethbridge, might facilitate participation of Alberta nurse educators. Additionally, if a master's in nursing program with a focus on preparing for teaching in nursing remains either unavailable or inaccessible to Alberta nurse educators, some of these educators may decide to forgo pursuing master's level education in nursing, while others may opt to study at the master's level in non-nursing programs.

Part-time study, evening and summer session courses might be ways of encouraging participation in a master's in nursing program with emphasis on teaching in nursing, since these delivery mechanisms would enable some participants to retain their existing teaching positions while studying, thereby reducing financial constraints to participation.

Since graduate level education builds upon baccalaureate level education, consideration might be given as to how a master's level program preparing Alberta nurse educators would extend and be different from the undergraduate nursing curricula.

The finding that Alberta nurse educators prepared at the master's and doctoral level in nursing differ in perceptions of the importance of some of the 40 specified program characteristics from those prepared at the baccalaureate level, suggests that provision might be made for incorporating the views of students into any subsequent curriculum planning, particularly with regard to the degree of nursing emphasis and research orientation of a master's in nursing program preparing nurse educators.

Implications for Research

Although this study has provided some useful information concerning master's level education in nursing in Alberta, further research in this area might expand the existing data base as follows:

1. Further investigation of the population of Alberta nurse educators employed in health care agency inservice programs to determine if their personal and professional characteristics, interest in participating in a special purpose master's in nursing program for Alberta nurse educators, and perceptions of goals and operational characteristics of such a program, differ significantly from the findings of this study.

2. Further research involving Alberta nurses currently enrolled in non-nursing master's degree programs in Alberta to determine their reasons for enrolling in non-nursing programs.

3. Further investigation involving assessment of nurse educator manpower needs in Alberta, including employers' perceptions of the teaching preparedness of nurse educators, as well as desired numbers of nurse educators.

4. Further research regarding the influence of nurse educators' personal and professional characteristics on their perceptions of formal professional development program goals and characteristics.

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APPENDICES

APPENDIX A

CANADIAN MASTER'S IN NURSING PROGRAMS

Table 47

Number of Master's in Nursing Programs in Canadian Universities by Focus of Program, 1966-1976*

Focus of Program	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976
Major Program—Nursing: Functional Orientation**	6	6	4	5	5	9	5	5	7	7	7
Major Program—Nursing: Clinical Orientation***	-	-	3	3	6	6	2	5	6	8	10
Major Program—Other Focus	-	-	-	-	-	-	-	1	1	1	2
General with Major	-	-	-	-	-	-	4	4	2	2	2
Total	6	6	7	8	11	15	11	15	16	18	21

*Programs having enrollment as of fall term.

**Nursing service, education, research, administration

***Psychiatric and mental health nursing, acute illness nursing, medical-surgical nursing, community health, specialist in nursing, long term illness nursing.

Based on: Canadian Nurses' Association. Countdown 1967 and 1968. Ottawa: The Association, 1968, 1969.

Statistics Canada. Nursing in Canada: Canadian Nursing Statistics, 1977. Ottawa: Department of Industry, Trade and Commerce, 1978.

Table 48

Enrollment in Master's in Nursing Programs in Canadian Universities by Focus of Program, 1966-1976*

Focus of Program	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976
Major Program—Nursing: Functional Orientation**	36	38	31	36	68	100	77	65	70	75	62
Major Program—Nursing: Clinical Orientation***	--	--	37	33	38	35	17	45	61	74	94
Major Program—Other Focus	--	--	--	--	--	--	--	1	8	10	30
General with Major	--	--	6	--	--	15	64	20	33	44	58
Total	36	38	74	69	106	150	158	131	172	203	244

*Enrollment as of fall term.

**Nursing service, nursing education, nursing research, teaching of nursing, public health administration.

***Acute illness nursing, psychiatric and mental health nursing, medical-surgical nursing, community health nursing, specialist in nursing, long term illness nursing.

Based on: Canadian Nurses' Association. Countdown 1967, 1968 and 1973. Ottawa: The Association, 1968, 1969, 1974.

Statistics Canada. Nursing in Canada: Canadian Nursing Statistics, 1977. Ottawa: Department of Industry, Trade and Commerce, 1978.

Table 49

Graduations from Master's in Nursing Programs in Canadian Universities by Focus of Program, 1963-1976*

Focus of Program	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976
Major Program—Nursing: Functional Orientation**	9	8	10	4	15	16	6	15	25	23	29	19	24	24
Major Program—Nursing: Clincial Orientation***	--	--	--	--	--	--	12	8	4	8	2	19	12	17
Major Program—Other Focus	--	--	--	--	--	--	--	--	--	--	--	--	4	11
General with Major	--	--	--	--	--	--	--	--	--	14	18	15	10	12
Total	9	8	10	4	15	16	18	23	29	45	49	53	50	65

*Graduations during academic year beginning September 1 to August 31.

**Nursing service, nursing education, nursing research, teaching of nursing public health administration.

***Acute illness nursing, psychiatric and mental health nursing, medical-surgical nursing, community health nursing, specialist in nursing, long term illness nursing.

Based on: Canadian Nurses' Association. Countdown 1968 and 1973. Ottawa: The Association, 1969, 1974.

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APPENDIX B

QUESTIONNAIRE

SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM FOR ALBERTA NURSE EDUCATORS

PART A: PERSONAL AND PROFESSIONAL DATA

Please circle the number on the right of the most accurate response, or complete as requested.

Do not write in this space

I.D. $\frac{}{1}\frac{}{2}\frac{}{3}\frac{1}{4}$

1. Your sex is:
   - Female 1
   - Male . . . . . 2 — 5

2. Your age, to your nearest birthday, is:
   - Under 25 1
   - 25 to 34 2
   - 35 to 44 3
   - 45 to 54 4
   - 55 to 64 5
   - 65 and over . . . . . 6 — 6

3. Your highest level of completed nursing education is:
   - R.N. diploma 1
   - Baccalaureate in nursing 2
   - Master's in nursing 3
   - Doctorate in nursing . . . . . 4 — 7

4. The year in which your highest level of nursing education was completed, was:
   - Before 1960 1
   - 1960 to 1963 2
   - 1964 to 1967 3
   - 1968 to 1971 4
   - 1972 to 1975 5
   - 1976 and after . . . . . 6 — 8

5. The provinces or countries in which your nursing education was taken, are: (circle as many responses as are required)
   - Alberta . . . . . 1 — 9
   - British Columbia . . . . . 1 — 10
   - Manitoba . . . . . 1 — 11
   - New Brunswick . . . . . 1 — 12
   - Newfoundland . . . . . 1 — 13
   - Nova Scotia . . . . . 1 — 14
   - Ontario . . . . . 1 — 15
   - Prince Edward Island . . . . . 1 — 16
   - Quebec . . . . . 1 — 17
   - Saskatchewan . . . . . 1 — 18
   - U.S.A. . . . . 1 — 19
   - Other. Please specify _____ 1 — 20

6. The nature of your initial nursing preparation was:
   - Hospital R.N. diploma program 1
   - College or technical institute R.N. diploma program . . . 2 — 21
   - Baccalaureate degree program 3

		Do not write in this space
7.	If you have a baccalaureate in nursing degree, you would describe the focus of your program as:	
	No specific focus, other than nursing in general. . 1	
	Focus on teaching and supervision in nursing . . . 2	
	Focus on community/public health 3	
	Focus on supervision/administration in nursing . . 4	22
	Focus on teaching of nursing 5	
	Focus on clinical specialization in nursing 6	
	Other focus. Please specify _____ 7	
8.	If you have a master's in nursing degree, you graduated from:	
	Dalhousie University 1	
	McGill University 2	
	University of British Columbia 3	
	University of Montreal 4	
	University of Toronto 5	23
	University of Western Ontario 6	
	University in U.S.A. 7	
	Other. Please specify _____ 8	
9.	If you have a master's in nursing degree, you would describe the focus of your program as:	
	No specific focus, other than nursing in general . 1	
	Focus on research in nursing 2	
	Focus on teaching of nursing 3	
	Focus on administration of nursing practice 4	
	Focus on administration of nursing education . . . 5	24
	Focus on administration of community/public health 6	
	Focus on practice in community/public health . . . 7	
	Focus on clinical specialization in nursing 8	
	Other. Please specify _____ 9	
10.	Your highest level of completed non-nursing education is:	
	High school 1	
	2 year college or technical institute diploma . . . 2	
	Baccalaureate degree 3	25
	Master's degree 4	
	Doctoral degree 5	
11.	The year in which your highest level of non-nursing education was completed was:	
	Before 1960 1	
	1960 to 1963 2	
	1964 to 1967 3	
	1968 to 1971 4	26
	1972 to 1975 5	
	1976 and after 6	
12.	Your total number of years of teaching experience in nursing education, including nursing inservice, are:	
	Less than 1 year 1	
	1 to 4 years 2	
	5 to 8 years 3	
	9 to 12 years 4	27
	13 to 16 years 5	
	17 to 20 years 6	
	21 years and over 7	

13. Your total number of years of non-teaching nursing work experience are:

		Do not write in this space
Less than 1 year	1	
1 to 4 years	2	
5 to 8 years	3	
9 to 12 years	4	28
13 to 16 years	5	
17 to 20 years	6	
21 years and over	7	

14. You are primarily involved as either a teacher or administrator in a:

Health care agency nursing inservice program	1	
Nursing assistant program	2	
Hospital R.N. diploma program	3	
College R.N. diploma program	4	29
Baccalaureate degree program	5	
Master's degree program	6	
Other. Please specify _____ _____	7	

15. If you have an administrative position, the title of that position is:

Co-ordinator	1	
Department Head/Chairman	2	
Assistant Director/Dean	3	30
Associate Director/Dean	4	
Director/Dean	5	

16. You would describe your present type of nursing education employment as:

Part-time, temporary	1	
Part-time, permanent	2	
Full-time, temporary	3	31
Full-time, permanent	4	

17. In your present position, the percentage of your workload directly related to your teaching function is:

Less than 25%	1	
26% to 50%	2	
51% to 75%	3	32
76% to 100%	4	

18. Your instructional activities are carried out in:

Clinical settings, mainly	1	
Classroom settings, mainly	2	
Clinical and classroom settings, equally	3	33
Nursing laboratory settings, mainly	4	
Other. Please specify _____	5	

19. The geographic location of your present place of nursing education employment is:

Calgary	1	
Edmonton	2	
Lethbridge	3	
Medicine Hat	4	34
Red Deer	5	
Other. Please specify _____	6	

4

PART B: PERCEPTIONS OF GOALS OF A SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM FOR ALBERTA NURSE EDUCATORS

Do not write in this space

In terms of your beliefs, please indicate your perceptions of the importance of the following possible goals of a special purpose master's in nursing program for Alberta nurse educators. Using the following response key, circle the number of the response which most accurately reflects your beliefs.

Response Key

1	2	3	4	5
not important	slightly important	moderately important	highly important	very highly important

The goal of a special purpose master's in nursing program for Alberta nurse educators is to:	Importance					
1. provide a foundation for doctoral study.	1	2	3	4	5	35
2. prepare nurses capable of expanding the body of nursing knowledge.	1	2	3	4	5	36
3. prepare expert nurse clinicians capable of serving as role models for nursing students and less experienced nurses.	1	2	3	4	5	37
4. prepare leaders in nursing education.	1	2	3	4	5	38
5. prepare nurse educators with advanced preparation to improve the quality of nursing education programs offered.	1	2	3	4	5	39
6. enhance nurses' performance as teachers of nursing.	1	2	3	4	5	40
7. satisfy one's desire for intellectual stimulation and growth.	1	2	3	4	5	41
8. prepare nurses to assume expanded roles in clinical practice situations.	1	2	3	4	5	42
9. prepare nurses capable of improving the quality of nursing inservice programs.	1	2	3	4	5	43
10. promote the individual nurse's professional growth.	1	2	3	4	5	44
11. increase the individual nurse's specialized skills and marketable talents, thereby enhancing opportunities for advancement.	1	2	3	4	5	45
12. prepare specialists in the organization and delivery of nursing education programs.	1	2	3	4	5	46
13. prepare expert nurse educators capable of generating higher levels of nursing practice through improved teaching	1	2	3	4	5	47
14. increase monetary rewards.	1	2	3	4	5	48
15. promote the advancement of nursing as a profession	1	2	3	4	5	49
16. increase individual nurse's personal, professional prestige	1	2	3	4	5	50

5

PART C: PERCEPTIONS OF CHARACTERISTICS OF A SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM FOR ALBERTA NURSE EDUCATORS

Do not write in this space

In terms of your beliefs, please indicate your perceptions of the importance of the following possible characteristics of a special purpose master's in nursing program for Alberta nurse educators. Using the following response key, circle the number of the response which most accurately reflects your beliefs.

Response Key

1	2	3	4	5
not important	slightly important	moderately important	highly important	very highly important

Possible Characteristics	Importance	
1. Stresses the use of self-paced instructional modules in the program.	1 2 3 4 5	51
2. Permits advanced placement of students upon admission to program, such as that based on challenge exams or past work experience.	1 2 3 4 5	52
3. Permits admission of students with non-nursing baccalaureate degrees.	1 2 3 4 5	53
4. Promotes high accessibility of students to faculty.	1 2 3 4 5	54
5. Equal emphasis in program on study in a clinical specialty and preparation for a functional role, such as teaching	1 2 3 4 5	55
6. Provides for transferability of credit in program of courses taken in other educational institution.	1 2 3 4 5	56
7. Stresses individualization of program according to student's expressed interest and goals.	1 2 3 4 5	57
8. Primary emphasis in program on study to prepare for the functional role, such as teaching.	1 2 3 4 5	58
9. Stresses utilization of stated performance or behavioral objectives.	1 2 3 4 5	59
10. Primary emphasis in program on study in a clinical nursing specialty.	1 2 3 4 5	60
11. Promotes student evaluation based on a pass/fail grading.	1 2 3 4 5	61
12. Promotes a research orientation characterized by preparation of a beginning researcher capable of initiating and carrying out independent research.	1 2 3 4 5	62

Response Key

1	2	3	4	5
not important	slightly important	moderately important	highly important	very highly important

Possible Characteristics	Importance	Do not write in this space
13. Requires experience in nursing practice as a prerequisite for admission.	1 2 3 4 5	63
14. Stresses the study of trends, issues and problems which affect nursing.	1 2 3 4 5	64
15. Emphasizes physical sciences component of program.	1 2 3 4 5	65
16. Stresses participation with students of medicine and other health professions in interdisciplinary classes.	1 2 3 4 5	66
17. Promotes learning about nursing education as a component of the overall post-secondary education system.	1 2 3 4 5	67
18. Stresses study of curriculum development concepts and processes and their applicability in nursing education.	1 2 3 4 5	68
19. Promotes the study of trends, issues and problems which affect the nature and delivery of health care.	1 2 3 4 5	69
20. Encourages independent study for credit.	1 2 3 4 5	70
21. Requires the completion of a research study, project or thesis for graduation.	1 2 3 4 5	71
22. Provides for some credit to be given for authorized student work experience undertaken during program.	1 2 3 4 5	72
23. Stresses counselling to assist the student with academic problems.	1 2 3 4 5	73
24. Emphasizes learning about the disadvantaged nursing student.	1 2 3 4 5	74
25. Requires that the research component of program focus on an aspect of nursing education.	1 2 3 4 5	75
26. Stresses counselling to assist students in selecting courses and planning their programs of study.	1 2 3 4 5	76

7

Response Key

1	2	3	4	5
not important	slightly important	moderately important	highly important	very highly important

Do not write in this space

I.D. $\frac{}{1}\frac{}{2}\frac{}{3}\frac{2}{4}$

Possible Characteristics	Importance	
27. Emphasizes the humanities component of the program.	1 2 3 4 5	5
28. Stresses participation in courses dealing with change and how to effect change.	1 2 3 4 5	6
29. Provides some micro-teaching experience (controlled simulated teaching sessions in which instructional skills can be practised).	1 2 3 4 5	7
30. Emphasizes learning about the nursing student in today's milieu.	1 2 3 4 5	8
31. Provides for clinical specialization in other than the traditional areas of maternal/child, medical/surgical, psychiatric/community mental health.	1 2 3 4 5	9
32. Program is distinguished by concentrated study in nursing.	1 2 3 4 5	10
33. Requires that the research component of the program focus on an aspect of a clinical nursing specialty.	1 2 3 4 5	11
34. Emphasizes learning about the development of mutually satisfying student-teacher relationships.	1 2 3 4 5	12
35. Emphasizes study of the teaching/learning process in nursing education.	1 2 3 4 5	13
36. Emphasizes the social sciences component of the program.	1 2 3 4 5	14
37. Promotes a research orientation characterized by preparation of an informed consumer of research, capable of using research findings as a basis for nursing activities.	1 2 3 4 5	15
38. Stresses follow-up of program graduates to aid in program evaluation.	1 2 3 4 5	16
39. Stresses counselling to assist the student with personal problems.	1 2 3 4 5	17
40. Fosters integration of the traditional clinical areas of maternal/child, medical/surgical, and psychiatric/community mental health.	1 2 3 4 5	18

PART D: EXPRESSED INTEREST IN A SPECIAL PURPOSE MASTER'S IN NURSING PROGRAM FOR ALBERTA NURSE EDUCATORS

Do not write in this space

Please circle the number on the right of the most accurate response, or complete as requested. If your response to question #1 is "no," please complete question #2 and proceed to Part E of the questionnaire. If your response to question #1 is "yes," please omit question #2 and proceed to questions #3 and #4 and Part E.

1. Are you interested in the possibility, sometime in the future, of undertaking a special purpose master's in nursing program for Alberta nurse educators?

Yes	1	19
No	2	

2. If your answer to question #1 is "no," please indicate which of the following responses best describes your reason(s). Circle no more than three responses.

Academic demands too difficult	1	20
Lack of time	1	21
Already have a master's degree	1	22
Family responsibilities	1	23
Lack prerequisite baccalaureate degree	1	24
Currently enrolled in master's program	1	25
Lack of financial assistance	1	26
Loss of employment seniority	1	27
Too long a period of time since previous study	1	28
Loss of present position	1	29
Thesis requirement of program	1	30
Too near retirement	1	31
Master's level education not a priority	1	32
Other. Please specify _____	1	33

Please proceed to Part E of the questionnaire.

3. If your answer to question #1 is "yes," please indicate by circling the number on the right only those of the following provisions which would be significant inducements for you to participate in a special purpose master's in nursing program for Alberta nurse educators. You may circle as few or as many responses as are applicable to your situation. You need not circle a response number in every category.

Place		
Calgary	1	34
Edmonton	1	35
Lethbridge	1	36
Elsewhere	1	37

(Question #3 continued on next page.)

(Question #3, continued)

		Do not write in this space
Time of Study		
Evening classes	1	38
Day-time classes	1	39
Weekend classes	1	40
Summer session classes	1	41
Setting		
University campus	1	42
Nearby off-campus locations	1	43
Intensity		
All full-time study	1	44
All part-time study	1	45
Mixed full and part-time study	1	46
Term of Full-Time Study		
0 months	1	47
1 to 4 months	1	48
5 to 8 months	1	49
9 to 12 months	1	50
13 or more months	1	51
Financial Support		
Basic government grants and loans	1	52
Special financial award	1	53
Leave Arrangements		
Leave without pay	1	54
Leave with partial pay	1	55
Leave with full pay	1	56
Permission to attend classes while still on job	1	57
Rewards		
Salary increment	1	58
Professional recognition	1	59
Promotion to more responsible position	1	60

4. Which, if any, of the following, would present barriers to your participation in a special purpose master's in nursing program for Alberta nurse educators? Circle no more than three responses.

None of the following	1	61
Personal time restraints	1	62
Family responsibilities	1	63
Lack of financial assistance	1	64
Loss of employment seniority	1	65
Long period of time since previous study	1	66
Loss of present position	1	67
Thesis requirement of program	1	68
Academic expectations of master's level program	1	69
Distance to university offering the program	1	70
Other. Please specify _____	1	71

10

PART E: COMMENTS

Any comments which you have concerning a special purpose master's in nursing program for Alberta nurse educators would be appreciated. Thank you for participating in this questionnaire survey.

APPENDIX C

CORRESPONDENCE

THE UNIVERSITY OF ALBERTA

Department of Educational Administration
EDMONTON, ALBERTA, CANADA T6G 2G5 TELEPHONE 432-5241

I am currently completing thesis requirements for the Master's Program in Educational Administration at the University of Alberta and would like to solicit your assistance in the distribution of my study questionnaires. My thesis topic deals with Alberta nurse educators' perceptions of desirable goals and characteristics of special purpose master's level education for nurse educators.

I would appreciate the opportunity to explain further my thesis plans and to discuss with you the possibility of having my questionnaires distributed to all your part- and full-time nursing instructors and administrators. Each questionnaire would have attached to it a letter of explanation, a stamped, self-addressed envelope for return mailing and a stamped, self-addressed summary of findings postcard for respondents wishing a summary of the study findings. If these questionnaires could be distributed within your school of nursing, I would be most appreciative.

In order to discuss my request further with you and to provide you with additional information, I will telephone you during the week of March 5th to 9th.

Thank you for your kind consideration.

Yours sincerely,

Sharon Richardson, R.N., B.Sc.N.

THE UNIVERSITY OF ALBERTA

Department of Educational Administration
EDMONTON, ALBERTA, CANADA T6G 2G5 TELEPHONE 432-5241

March 26, 1979

Please find enclosed copies of my thesis questionnaire sufficient for the number of faculty and administrators you identified during our phone conversation of two weeks previous, plus an additional one or two copies. I would be very appreciative if these questionnaires could be distributed to all your full and part-time nursing educators and administrators. Unused copies may be returned to me in the enclosed stamped, self-addressed envelope, along with an indication of the number of questionnaires distributed, to enable me to calculate the questionnaire response rate and the generalizability of the findings. The section at the bottom of this page can be used for the latter purpose.

Your assistance in distributing these questionnaires is greatly appreciated. Thank you for your cooperation.

Sincerely yours

Sharon Richardson

Sharon Richardson, R.N., B.Sc.N.

PROGRAM NAME _____

NUMBER OF QUESTIONNAIRES DISTRIBUTED _____

THE UNIVERSITY OF ALBERTA

Department of Educational Administration
EDMONTON, ALBERTA, CANADA T6G 2G5 TELEPHONE 432-5241

March 26, 1979

Dear Nurse Educator:

Graduate level education in nursing is a topic of interest in Alberta today.

The attached questionnaire concerns Alberta nurse educators' perceptions of important goals and characteristics for a Special Purpose Master's in Nursing Program for Alberta Nurse Educators, and is being circulated to educators teaching in Alberta nursing assistant, diploma, baccalaureate and master's degree programs, as well as to selected inservice nurse educators. The term Special Purpose Master's in Nursing Program is used to describe a first level graduate degree program focusing on nursing and the teaching of nursing. The data collected will be used in the preparation of my master's thesis. This thesis will include recommendations to be made to Master's in Nursing program planners.

I am particularly desirous of obtaining your responses in that I believe that you can contribute significantly in identifying the direction that master's level nursing education should take in Alberta. The directors of Alberta's nursing education programs are assisting in the distribution of this questionnaire. The enclosed questionnaire has been pretested and has been revised in order to make it possible to obtain all necessary data while still requiring a minimum of your time.

Your assistance in completing the questionnaire and returning it in the stamped, self-addressed envelope prior to April 9th, would be greatly appreciated.

I will be pleased to send you a summary of the study findings, if you desire. For this purpose, a stamped, self-addressed postcard is enclosed.

Thank you for your cooperation.

Sincerely yours

Sharon Richardson

Sharon Richardson, R.N., B.Sc.N.

Request for Study Summary

Dear Sharon:

Please send me a summary of your study concerning Special Purpose Master's in Nursing Program for Alberta Nurse Educators to:

NAME _____

STREET _____

CITY _____

POSTAL CODE _____

THE UNIVERSITY OF ALBERTA

Department of Educational Administration
EDMONTON, ALBERTA, CANADA T6G 2G5 TELEPHONE 432-5241

April 23, 1979

Dear Nurse Educator:

Recently a copy of my thesis questionnaire concerning Alberta nurse educators' perceptions of important goals and characteristics for a Special Purpose Master's in Nursing Program for Alberta Nurse Educators was distributed to you.

If you have not yet had an opportunity to complete and return the questionnaire, could you do so at your earliest convenience? I believe that you can contribute significantly in identifying the direction that master's level education in nursing should take in Alberta; therefore, I am very desirous of obtaining your views in this regard.

If you have already completed and returned the questionnaire, I would like to express my appreciation for your participation in the study. To date, the response rate has been 60 percent. Many respondents have offered valuable comments concerning master's level education in nursing for Alberta nurse educators.

If you indicated an interest in receiving a summary of the study findings by returning the stamped, self-addressed summary of findings postcard accompanying the questionnaire, you may expect to receive this information by late July.

Again, I would like to thank you for your cooperation.

Sincerely yours,

Sharon Richardson, R.N., B.Sc.N.
462-9412

APPENDIX D

SCHEFFÉ TESTS FOR STATISTICALLY SIGNIFICANT F TESTS

Table 50

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Age

Program Goals		Age in Years		
		<34	35-44	≥45
Advance nursing as a profession	<34	1.0000	0.0964	0.1790
	35-44 years		1.0000	0.9892
	≥45 years			1.0000

Table 51

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Years of Teaching Experience in Nursing

Program Goals		Years of Experience				
		<1	1-4	5-8	9-12	13≥
Satisfy desire for intellectual stimulation and growth	<1	1.0000	0.1329	0.9898	0.7197	0.6160
	1-4		1.0000	0.1192	0.8314	0.9659
	5-8			1.0000	0.8599	0.7580
	9-12				1.0000	0.9989
	13≥					1.0000

Table 52

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Years of Non-Teaching Nursing Work Experience

Program Goals		Years of Experience				
		<1	1-4	5-8	9-12	13≥
Improve quality of nursing inservice	<1	1.0000	0.4623	0.1458	0.5642	0.7261
	1-4		1.0000	0.8925	0.9922	0.4140
	5-8			1.0000	0.9918	0.8907
	8-12				1.0000	0.2323
	13≥					1.0000

Table 53

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Nature of Employing Program

Program Goals		Type of Program				
		Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree
Provide a foundation for doctoral study	Inservice	1.0000	0.9248	0.9803	0.5174	0.0124
	Nursing Assistant		1.0000	0.9873	0.9841	0.2990
	Hospital Diploma			1.0000	0.5636	0.0008
	College Diploma				1.0000	0.3881
	University Degree					1.0000
Satisfy desire for intellectual stimulation and growth	Inservice	1.0000	0.6103	0.1230	0.0687	0.0938
	Nursing Assistant		1.0000	0.9966	0.9311	0.9740
	Hospital Diploma			1.0000	0.9493	0.9919
	College Diploma				1.0000	0.9985
	University Degree					1.0000

Table 54

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Instructional Setting

Program Goals		Instructional Setting			
		Mainly Clinical	Mainly Classroom	Equally Clinical and Classroom	Other
Expand body of nursing knowledge	Mainly Clinical	1.0000	0.2525	0.3869	0.7312
	Mainly Classroom		1.0000	0.0047	0.2624
	Equally			1.0000	0.9678
	Other				1.0000
Enhance nurse educators' teaching	Mainly Clinical	1.0000	0.9809	0.2352	0.1848
	Mainly Classroom		1.0000	0.6265	0.2776
	Equally			1.0000	0.5387
	Other				1.0000
Preparing expert nurse clinicians	Mainly Clinical	1.0000	0.1580	0.9631	0.6812
	Mainly Classroom		1.0000	0.0415	0.1842
	Equally			1.0000	0.7783
	Other				1.0000

Table 54 (continued)

Program Goals		Instructional Setting			
		Mainly Clinical	Mainly Classroom	Equally Clinical and Classroom	Other
Promote individual's professional growth	Mainly Clinical	1.0000	0.7643	0.9376	0.1719
	Mainly Classroom		1.0000	0.4171	0.0714
	Equally			1.0000	0.2484
	Other				1.0000
Advance nursing as a profession	Mainly Clinical	1.0000	0.8317	0.3577	0.4895
	Mainly Classroom		1.0000	0.0951	0.2932
	Equally			1.0000	0.8398
	Other				1.0000

Table 55

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Highest Level of Nursing Education

Program Goals		Categories		
		R.N. Diploma	Baccalaureate Degree	Master's or Doctorate
Provide foundation for doctoral study	R.N. Diploma	1.0000	0.9298	0.2275
	Baccalaureate Degree		1.0000	0.0270
	Master's or Doctorate			1.0000
Increase personal, professional prestige	R.N. Diploma	1.0000	0.0434	0.9387
	Baccalaureate Degree		1.0000	0.0876
	Master's or Doctorate			1.0000

Table 56

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Goals by Year in Which Highest Level of Non-Nursing Education Completed

Program Goals		Year				
		<1960	1960-63	1964-67	1968-71	1972>
Advance nursing as a profession	<1960	1.0000	0.9984	0.1193	0.9999	0.9985
	1960-63		1.0000	0.1202	0.9953	0.9865
	1964-67			1.0000	0.2299	0.4291
	1968-71				1.0000	0.9998
	1972>					1.0000

Table 57

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Age

Program Characteristics		Age in Years		
		≤34	35-44	45≥
Provides for credit transferability	≤34	1.0000	0.0153	0.6653
	35-44		1.0000	0.4256
	45≥			1.0000
Stresses program individualization	≤34	1.0000	0.0403	0.2313
	35-44		1.0000	0.9636
	45≥			1.0000
Promotes pass/fail grading	≤34	1.0000	0.0304	0.0502
	35-44		1.0000	0.9173
	45≥			1.0000
Prepares beginning researcher	≤34	1.0000	0.0906	0.2620
	35-44		1.0000	0.9964
	45≥			1.0000
Emphasizes humanities	≤34	1.0000	0.9274	0.0250
	35-44		1.0000	0.0754
	45≥			1.0000
Provides non-traditional clinical specialization	≤34	1.0000	0.9824	0.0430
	35-44		1.0000	0.0442
	45≥			1.0000
Requires clinical nursing research	≤34	1.0000	0.0270	0.0097
	35-44		1.0000	0.6704
	45≥			1.0000

Table 57 (continued)

Program Characteristics		Age in Years		
		≤34	35-44	45≥
Prepares informed research consumer	≤34	1.0000	0.1215	0.0255
	35-44		1.0000	0.5797
	45≥			1.0000

Table 58

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Years of Teaching Experience in Nursing

Program Characteristics		Number of Years				
		<1	1-4	5-8	9-12	13≥
Primary emphasis on teaching	<1	1.0000	0.9967	0.4434	0.6240	0.2806
	1-4		1.0000	0.3632	0.6322	0.2350
	5-8			1.0000	0.9997	0.9739
	9-12				1.0000	0.9539
	13≥					1.0000
Promotes pass/fail grading	<1	1.0000	0.4460	0.1398	0.0209	0.1508
	1-4		1.0000	0.8977	0.3258	0.8326
	5-8			1.0000	0.8385	0.9975
	9-12				1.0000	0.9814
	13≥					1.0000
Emphasizes physical sciences	<1	1.0000	0.8173	0.3161	0.3637	0.9998
	1-4		1.0000	0.7882	0.8262	0.6324
	5-8			1.0000	1.0000	0.1525
	9-12				1.0000	0.2013
	13≥					1.0000

Table 58 (continued)

Program Characteristics		Number of Years				
		<1	1-4	5-8	9-12	13≥
Provides non-traditional clinical specialization	<1	1.0000	0.9102	0.4528	0.5782	0.9932
	1-4		1.0000	0.8022	0.9041	0.6184
	5-8			1.0000	1.0000	0.1678
	9-12				1.0000	0.2706
	13≥					1.0000
Program is distinguished by concentrated study in nursing	<1	1.0000	0.9540	0.9907	0.9020	0.6468
	1-4		1.0000	0.5274	0.9981	0.1031
	5-8			1.0000	0.4783	0.7803
	9-12				1.0000	0.1005
	13≥					1.0000
Requires clinical nursing research	<1	1.0000	0.5288	0.6588	0.8260	0.9396
	1-4		1.0000	0.9997	0.9925	0.0731
	5-8			1.0000	0.9991	0.1342
	9-12				1.0000	0.2847
	13≥					1.0000

Table 59

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Years of Non-Teaching Nursing Work Experience

Program Characteristics		Years			
		≤4	5-8	9-12	13≥
Stresses use of instructional modules	≤4	1.0000	0.9999	0.2222	0.2493
	5-8		1.0000	0.3370	0.3736
	9-12			1.0000	0.0236
	13≥				1.0000
Stresses program individualization	≤4	1.0000	0.9670	0.0423	0.6980
	5-8		1.0000	0.2358	0.8999
	9-12			1.0000	0.8471
	13≥				1.0000
Requires nursing practice experience for admission	≤4	1.0000	0.3286	0.7816	0.0551
	5-8		1.0000	0.9753	0.5453
	9-12			1.0000	0.3984
	13≥				1.0000
Encourages independent study	≤4	1.0000	0.9374	0.1981	0.4238
	5-8		1.0000	0.1505	0.7298
	9-12			1.0000	0.0476
	13≥				1.0000

Table 59 (continued)

Program Characteristics		Years			
		≤4	5-8	9-12	13≥
Emphasizes humanities	≤4	1.0000	0.6389	0.9500	0.0002
	5-8		1.0000	0.5510	0.0151
	9-12			1.0000	0.0007
	13≥				1.0000
Program is distinguished by concentrated study in nursing	≤4	1.0000	0.8912	0.6426	0.1310
	5-8		1.0000	0.4250	0.0794
	9-12			1.0000	0.7109
	13≥				1.0000
Requires clinical nursing research	≤4	1.0000	0.9979	0.0927	0.1364
	5-8		1.0000	0.2535	0.2546
	9-12			1.0000	0.9883
	13≥				1.0000
Stresses student counselling for personal problems	≤4	1.0000	0.4260	0.9971	0.0116
	5-8		1.0000	0.7846	0.2576
	9-12			1.0000	0.0656
	13≥				1.0000

Table 60

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Nature of Employing Program

Program Characteristics		Nature of Program				
		Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree
Permits admission of non-nursing baccalaureates	Inservice	1.0000	0.0046	0.5083	0.9625	0.8601
	Nursing Assistant		1.0000	0.0390	0.0115	0.0177
	Hospital Diploma			1.0000	0.8555	0.9596
	College Diploma				1.0000	0.9973
	University Degree					1.0000
Provides for credit transferability	Inservice	1.0000	0.6085	0.2076	0.8780	0.9955
	Nursing Assistant		1.0000	0.9998	0.9593	0.2590
	Hospital Diploma			1.0000	0.7150	0.0047
	College Diploma				1.0000	0.4787
	University Degree					1.0000
Primary emphasis on teaching	Inservice	1.0000	0.2114	0.5071	0.4601	0.9878
	Nursing Assistant		1.0000	0.7785	0.9370	0.0279
	Hospital Diploma			1.0000	0.9960	0.0309
	College Diploma				1.0000	0.0601
	University Degree					1.0000

Table 60 (continued)

Program Characteristics		Nature of Program				
		Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree
Primary emphasis on clinical specialization	Inservice	1.0000	0.9471	0.9572	0.9999	0.8108
	Nursing Assistant		1.0000	0.5198	0.8777	0.9998
	Hospital Diploma			1.0000	0.9649	0.0768
	College Diploma				1.0000	0.5880
	University Degree					1.0000
Requires nursing practice experience for admission	Inservice	1.0000	0.3603	0.0216	0.4014	0.7350
	Nursing Assistant		1.0000	0.9824	0.9966	0.8775
	Hospital Diploma			1.0000	0.7243	0.1432
	College Diploma				1.0000	0.9508
	University Degree					1.0000
Promotes study of post-secondary system	Inservice	1.0000	0.9506	0.7952	0.6263	0.8692
	Nursing Assistant		1.0000	0.9999	0.9840	0.3752
	Hospital Diploma			1.0000	0.9770	0.0182
	College Diploma				1.0000	0.0238
	University Degree					1.0000
Encourages independent study	Inservice	1.0000	0.7149	0.9722	1.0000	0.3973
	Nursing Assistant		1.0000	0.8509	0.5699	0.9995
	Hospital Diploma			1.0000	0.9084	0.3605
	College Diploma				1.0000	0.1663
	University Degree					1.0000

Table 60 (continued)

Program Characteristics		Nature of Program				
		Inservice	Nursing Assistant	Hospital Diploma	College Diploma	University Degree
Requires completion of research study	Inservice	1.0000	0.8295	0.4304	0.8455	0.7970
	Nursing Assistant		1.0000	0.9985	0.9996	0.1326
	Hospital Diploma			1.0000	0.9620	0.0003
	College Diploma				1.0000	0.0576
	University Degree					1.0000
Emphasizes learning about disadvantaged nursing student	Inservice	1.0000	0.9055	0.7374	0.9105	0.9693
	Nursing Assistant		1.0000	1.0000	0.9999	0.4783
	Hospital Diploma			1.0000	0.9984	0.0571
	College Diploma				1.0000	0.3416
	University Degree					1.0000
Program is distinguished by concentrated study in nursing	Inservice	1.0000	0.7374	0.2396	0.9759	0.9875
	Nursing Assistant		1.0000	0.9964	0.9346	0.3222
	Hospital Diploma			1.0000	0.4655	0.0032
	College Diploma				1.0000	0.6753
	University Degree					1.0000

Table 61

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Percentage of Workload Directly Related to Teaching Function

Program Characteristics		Percentage of Workload		
		≤50%	51-75%	76%≥
Stresses behavioral objectives	≤50%	1.000	0.1057	0.9798
	51-75%		1.0000	0.0504
	76%≥			1.0000
Requires completion of research study	≤50%	1.0000	0.1580	0.0444
	51-75%		1.0000	0.9314
	76%≥			1.0000
Provides credit for work experience	≤50%	1.0000	0.0412	0.9462
	51-75%		1.0000	0.0168
	76%≥			1.0000
Emphasizes learning about disadvantaged nursing student	≤50%	1.0000	0.0118	0.1799
	51-75%		1.0000	0.2191
	76%≥			1.0000
Requires nursing education research	≤50%	1.0000	0.1749	0.9923
	51-75%		1.0000	0.0373
	76%≥			1.0000

Table 62

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Instructional Setting

Program Characteristics		Setting			
		Mainly Clinical	Mainly Classroom	Equally Clinical and Classroom	Other
Permits advanced student placement	Mainly Clinical	1.0000	0.7312	0.8577	0.0582
	Mainly Classroom		1.0000	0.9756	0.2062
	Equally			1.0000	0.1154
	Other				1.0000
Provides for credit transferability	Mainly Clinical	1.0000	0.1011	0.9999	0.9173
	Mainly Classroom		1.0000	0.0570	0.3152
	Equally			1.0000	0.9238
	Other				1.0000
Promotes pass/fail grading	Mainly Clinical	1.0000	0.6274	0.7515	0.1300
	Mainly Classroom		1.0000	0.1338	0.0376
	Equally			1.0000	0.2603
	Other				1.0000

Table 62 (continued)

Program Characteristics		Setting			
		Mainly Clinical	Mainly Classroom	Equally Clinical and Classroom	Other
Stresses study of nursing research	Mainly Clinical	1.0000	0.9835	0.0501	0.1577
	Mainly Classroom		1.0000	0.2568	0.2379
	Equally			1.0000	0.6578
	Other				1.0000
Emphasizes humanities	Mainly Clinical	1.0000	0.9951	0.0247	0.0905
	Mainly Classroom		1.0000	0.0365	0.0794
	Equally			1.0000	0.5989
	Other				1.0000

Table 63

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Geographic Location of Employment

Program Characteristics		Location		
		Calgary	Edmonton	Elsewhere
Requires nursing practice experience for admission	Calgary	1.0000	0.0722	0.0465
	Edmonton		1.0000	0.5367
	Elsewhere			1.0000
Program is distinguished by concentrated study in nursing	Calgary	1.0000	0.1847	0.0356
	Edmonton		1.0000	0.2799
	Elsewhere			1.0000

Table 64

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Highest Level of Nursing Education

Program Characteristics		Categories		
		R.N. Diploma	Baccalaureate Degree	Master's or Doctorate
Permits admission of non-nursing baccalaureates	R.N. Diploma	1.0000	0.0092	0.0247
	Baccalaureate Degree		1.0000	0.9497
	Master's or Doctorate			1.0000
Equal emphasis on clinical specialization and teaching	R.N. Diploma	1.0000	0.6455	0.1470
	Baccalaureate Degree		1.0000	0.0010
	Master's or Doctorate			1.0000
Primary emphasis on clinical specialization	R.N. Diploma	1.0000	0.8106	0.2124
	Baccalaureate Degree		1.0000	0.0073
	Master's or Doctorate			1.0000
Requires experience in nursing practice for admission	R.N. Diploma	1.0000	0.1924	0.9167
	Baccalaureate Degree		1.0000	0.0415
	Master's or Doctorate			1.0000

Table 64 (continued)

Program Characteristics		Categories		
		R.N. Diploma	Baccalaureate Degree	Master's or Doctorate
Promotes study of post-secondary system	R.N. Diploma	1.0000	0.4680	0.7045
	Baccalaureate Degree		1.0000	0.0492
	Master's or Doctorate			1.0000
Requires completion of a research study	R.N. Diploma	1.0000	0.6836	0.0094
	Baccalaureate Degree		1.0000	0.0062
	Master's or Doctorate			1.0000
Provides credit for work experience	R.N. Diploma	1.0000	0.9993	0.1305
	Baccalaureate Degree		1.0000	0.0225
	Master's or Doctorate			1.0000
Provides for non-traditional clinical specialization	R.N. Diploma	1.0000	0.2556	0.7215
	Baccalaureate Degree		1.0000	0.0177
	Master's or Doctorate			1.0000
Program is distinguished by concentrated study in nursing	R.N. Diploma	1.0000	0.6358	0.0288
	Baccalaureate Degree		1.0000	0.0000
	Master's or Doctorate			1.0000

Table 64 (continued)

Program Characteristics		Categories		
		R.N. Diploma	Baccalaureate Degree	Master's or Doctorate
Requires clinical nursing research	R.N. Diploma	1.0000	0.0734	0.8281
	Baccalaureate Degree		1.0000	0.0045
	Master's or Doctorate			1.0000
Prepares informed research consumer	R.N. Diploma	1.0000	0.9782	0.0151
	Baccalaureate Degree		1.0000	0.0010
	Master's or Doctorate			1.0000
Stresses counselling to assist student with personal problems	R.N. Diploma	1.0000	0.0577	0.5313
	Baccalaureate Degree		1.0000	0.5577
	Master's or Doctorate			1.0000

Table 65

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Year in Which Highest Level of Nursing Education Completed

Program Characteristic		Year of Completion			
		≤1967	1968-71	1972-75	1976≥
Promotes accessibility of students to faculty	≤1967	1.0000	0.7339	0.8274	0.0461
	1968-71		1.0000	0.9983	0.2795
	1972-75			1.0000	0.2211
	1976≥				1.0000
Stresses curriculum development study	≤1967	1.0000	0.9219	0.3131	0.5677
	1968-71		1.0000	0.0536	0.1977
	1972-75			1.0000	0.9939
	1976≥				1.0000

Table 66

Probability Matrix for Scheffé Multiple Comparison of Means of Statistically Significant Mean Differences in Alberta Nurse Educators' Perceptions of Importance of Program Characteristics by Year in Which Highest Level of Non-Nursing Education Completed

Program Characteristics		Year				
		<1960	1960-63	1964-67	1968-71	1972≥
Promotes accessibility of students to faculty	<1960	1.0000	0.6096	0.1051	0.2648	0.9950
	1960-63		1.0000	0.9371	0.9932	0.9176
	1964-67			1.0000	0.9962	0.4843
	1968-71				1.0000	0.7055
	1972≥					1.0000
Provides for credit transferability	<1960	1.0000	0.4475	0.0184	0.2441	0.6275
	1960-63		1.0000	0.7967	0.9989	1.0000
	1964-67			1.0000	0.8980	0.7744
	1968-71				1.0000	0.9965
	1972≥					1.0000
Stresses program individualization	<1960	1.0000	0.0712	0.0325	0.9100	0.6323
	1960-63		1.0000	1.0000	0.4750	0.8981
	1964-67			1.0000	0.3606	0.8475
	1968-71				1.0000	0.9763
	1972≥					1.0000

Table 66 (continued)

Program Characteristics		Year				
		<1960	1960-63	1964-67	1968-71	1972≥
Stresses behavioral objectives	<1960	1.0000	0.0533	0.1374	0.9999	0.1963
	1960-63		1.0000	0.9886	0.0636	0.5855
	1964-67			1.0000	0.1545	0.8187
	1968-71				1.0000	0.8938
	1972≥					1.0000
Promotes pass/fail grading	<1960	1.0000	0.9841	0.5945	0.2959	0.9943
	1960-63		1.0000	0.3811	0.1717	1.0000
	1964-67			1.0000	0.9911	0.5114
	1968-71				1.0000	0.2746
	1972≥					1.0000
Promotes study of post-secondary system	<1960	1.0000	0.9915	0.1805	0.9999	0.9655
	1960-63		1.0000	0.5526	0.9984	0.8649
	1964-67			1.0000	0.3747	0.0961
	1968-71				1.0000	0.9541
	1972≥					1.0000
Stresses academic counselling	<1960	1.0000	0.9183	0.0406	0.9766	0.8920
	1960-63		1.0000	0.4489	0.9993	1.0000
	1964-67			1.0000	0.2831	0.5752
	1968-71				1.0000	0.9972
	1972≥					1.0000